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THE
BOSTON MEDICAL AND SURGICAL
JOURNAL.

MDCCCXXIX—XXX.

==
VOLUME II.
==

BOSTON :
JOHN COTTON, PROPRIETOR AND PUBLISHER,
184 Washington Street.

1830.

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I.

Facts relating to the Influence of decomposing Animal Matter in producing Fevers.

Communicated for the Boston Medical and Surgical Journal.

THE atmosphere we live in is known to be the vehicle of many diseases. Places are more or less healthy according to the atmosphere which prevails in them; and its varieties depend on exhalations from the surface of the earth. The vast quantities of vegetable substance with which most places abound, being operated on by moisture and a certain degree of heat, are thrown into a state of decomposition. In this process, certain gases, or other volatile matters, are developed, which have received the name of *miasmata* or *malaria*, and are the immediate agents in causing disease. They exist in the banks of rivers, on marshy grounds, and in all places where vegetable substances are not covered by water, but sufficiently moistened by it to favor decomposition. Warm climates and warm seasons are most fruitful in the production of these exhalations, and in the diseases generated by them. During the latter part of summer or the beginning of autumn, the

miasmata produce the yellow fever, bilious, remittent, intermittent, or fever and ague, in warm climates principally; and dysentery, diarrhœa and cholera, in all climates. Although the influence of miasmata has been known from an early period, in consequence of their having depopulated extensive regions, and often destroyed considerable armies; yet their nature, and the laws by which they are governed, are still very imperfectly understood. This, however, is admitted by the whole medical world,—that such miasmata exist, and that they arise from the decomposition of vegetable substance.

Some persons have confounded the effects of decomposing animal substances, with those arising from vegetables. It is, perhaps, a common opinion, that the effluvia of putrefying animals are equally dangerous with those from the vegetable kingdom; and it is certain that the people are more apprehensive of the stench of a dead animal in hot weather, than of the secret, but deadly poison of the malaria.

The object of these remarks is to point out the error of this opinion,—to show that the decomposition of dead animal matter does not generate that peculiar princi-

ple which is the special cause of fevers and kindred diseases, and to show this by facts, many of which are notorious, and within the cognisance of the whole community.

Some occupations are carried on in the midst of the decomposition of animal matter. Let us inquire whether those who exercise such occupations are, like the inhabitants of miasmatic districts, peculiarly liable to fevers.

Among those who are thus exposed, we find butchers, and such as live in the vicinity of slaughter houses, soap-boilers, tallow chandlers, tanners and curriers, seamen in whaling vessels, grave-diggers and night-men. Here we see a large body of men of various occupations, exposed to various forms of decaying and decomposing *animal* matter, from its earliest stage of fermentation to the highest degree of putrefaction. If the effluvia from matters in this state are injurious, we must expect to find those exposed to them unhealthy, liable to fevers, epidemics, and frequent casualties.

The butchers' employment does not necessarily expose them to bad air; but it is well known that in places where this business is carried on, the offals are allowed to accumulate, and by their putrefaction fill the surrounding atmosphere. Are the persons exposed to these offensive odors peculiarly liable to fevers and epidemics? An inquiry of the most intelligent concerned in this profession, has been uniformly answered in the negative. They without exception declare that they are not particularly liable to fevers nor any other diseases; that the vicinity of their slaughter

houses is as healthy as other places, and that the men employed in them are stout and healthy. An intelligent physician,* who has practised in a town near Boston, which contains more slaughter houses than any town in New England, declares, on an experience of more than thirty years, that the butchers' employment is perfectly healthy; that the individuals who carry on this business, when temperate, are more robust than other men, and that he has known no epidemic nor local fever generated by the numerous slaughter houses under his constant inspection. This accords entirely with observations made in Europe, where the business is considered so favorable to the lungs, that it is common to send persons affected with pulmonary complaints to inhabit such places. Dr. Beddoes particularly recommended this practice; and he attributed its good effects to the superabundance of azotic gas which arises from decomposing animal substances, and to the same cause has been attributed the corpulency of butchers. Mr. S. informs me that, during the yellow fever of 1798 in Boston, the butchers generally maintained their situations in Faneuil Hall market, although there placed in the very midst of the disease; that not one of them was affected by the epidemic, excepting himself, and he from going into a cellar which had for some time been closed, and was damp and foul. Dr. Rush mentions a fact of the same nature. In the terrible yellow fever of 1795, which nearly depopulated the city of Philadelphia, out of one hundred butchers who

* Dr. Bartlett, of Roxbury.

remained in the city, only *three* were attacked by yellow fever.

The soap-boilers and tallow chandlers work in an atmosphere filled with effluvia from the decomposition of animal fat. In hot weather the fat, having been some time accumulating in private houses, is in a highly putrid state when brought to the manufactory. Yet the fact is known that the workmen are healthy,—not liable to fevers nor epidemics, and this is as well established in Europe as in this country. (See Bancroft on yellow fever, 637.)

The tanners, curriers, and leather dressers, are as healthy as other men; yet they are sometimes compelled to work on skins in a green or putrescent state in hot weather. I have known instances of disease produced by *handling* putrid skins. This has not unfrequently been followed by inflammation of the cellular membrane, absorbent vessels and glands, by mortification and death. These, however, are not the effects of effluvia received in the lungs, but of putrid matter taken into the absorbent system of vessels.

Night-men are exposed to the most atrocious and overbearing exhalations from putrefying animalized matters. The gaseous fluids of an unrespirable nature, sulphuretted and phosphuretted hydrogen gas, are sometimes so copiously evolved as to displace the atmospheric air, and cause asphyxia, suffocation, or fainting. In the deep vaults of the city of Paris, many persons have lost their lives from plunging too suddenly and incautiously into these vaults. Yet none of these people are subject to fevers or epidemics. If, when asphyxied, they are re-

moved from the gas, speedily they recover without any consequent disease. The same unrespirable gases, mingled with a sufficient portion of atmospheric air to render them respirable, have never been known to cause any kind of disease.

The whale ships are completely saturated with animal matter, which they retain in the hot as well as the cold latitudes. The seamen are more healthy than the seamen of other vessels, in the opinion of those long engaged in the business; as I have ascertained from the Nantucket captains, and from the other inhabitants of Nantucket and New Bedford, who may be characterized as a people remarkably intelligent and observing.

The manufacture of glue consists in boiling down the refuse of animal bodies. These substances are generally in a state of putrescency, and emit a highly offensive odor. The men employed in this and other similar works, have never been observed to be less healthy than other men; nor have they been known to be particularly liable to febrile complaints.

But to some it may appear that habit renders these classes of persons unsusceptible of the ill effects of putrid matter. This opinion will lose its force, when it is considered that numbers of individuals engaged in these trades are constantly changing their situation, from the common air to that which is impregnated. Thus, we see the soap-boilers quitting their works to drive through the streets; and all of the classes mentioned, or nearly all, leave the atmosphere in which they have lived through the day for a different one at night; so that the habit is

interrupted, and the susceptibility to the vitiated atmosphere renovated, to a degree abundantly sufficient to expose them to the full operation of the noxious principle. It does not, therefore, seem probable that habit can prevent the reception of disease from these sources, if any tendency to produce it existed in them. The inhabitants of districts in which malaria exists, remaining *constantly* in the same atmosphere, become accustomed to it, and are not so liable to fever as strangers; but they are a sickly, deformed, miserable, and short-lived people.

Some may possibly believe that the putrefaction of the flesh of quadrupeds and other animals may operate differently on the human frame from that of men in the same state of decomposition. This opinion is entirely at variance with the principles of science. The ultimate elements of different animal bodies are the same; viz., carbon, hydrogen, oxygen, and azote; and the secondary principles, or those formed by the spontaneous decomposition of such substances, are also the same, viz., phosphuretted, sulphuretted, and carburetted hydrogen gases, ammonia, carbonic acid gas, aqueous vapor, water and azotic gas; and the solid residuum is similar in all animals. It appears, then, that human and other animal bodies, consisting of the same principles in their composition and decomposition, must produce similar effects on the living body. On this head, however, we are not destitute of positive facts. Grave-diggers are among the men most exposed to the effluvia of human bodies in every stage of decomposition; yet no one can be ignorant of the truth that they are

not more subject to febrile, contagious or epidemic diseases, than other men. It has even been thought that those not habituated to the use of ardent spirits are less frequently affected by epidemic diseases than other people. Dr. Rush states, that in the yellow fever of 1793, very few grave-diggers were infected, compared to the whole number employed; and this he considers to be a fact not new, that grave-diggers were exempted from malignant fevers, since it had been previously noticed by Dr. Clark. (Rush on yellow fever, p. 156.) He further informs us that some physicians suspected the vicinity of grave-yards to be more under the influence of the epidemic than other places; but that he had found the reverse of this to be true in several cases,—owing, he thinks, to the yellow fever miasmata being diluted with the air of the grave-yards,—which *air was pure, compared with that stagnating in the streets*. Having made many inquiries of the most respectable sextons and undertakers in Boston, I have been told by them that no instance of fever of any kind had occurred from exposure to a dead body. In the yellow fever epidemic of 1793, they were called on to bury the dead under circumstances of great exposure and fatigue; yet they were not infected. They frequently have occasion to work in the midst of bodies in the highest state of putrefaction, and in warm weather as well as cold; but, although their senses are violently attacked, they have not been made ill from these exposures, nor do they experience more than a transient inconvenience. They make a distinction between the effects of the early and ad-

vanced stage of decomposition. A body which has been dead for a few weeks is not dangerous to approach; but after some months, if it has been closely confined, the surrounding air is not respirable, and will extinguish a lamp. When they open a tomb in a confined situation, they therefore first introduce their light, and if it burns they have no fear of entering. The gases which are thus deleterious, are carbonic acid, and sulphuretted and phosphuretted hydrogen gases; but they are not accumulated to a degree sufficient to produce the effect mentioned, unless the air has been entirely confined, and the decomposing substance has been considerable in quantity. These unrespirable gases are the same as those found in vaults and wells, and they produce the same effects; that is, if they are sufficiently abundant to exclude atmospheric air, they cause asphyxia, but never cause fevers of any form or description. Some of those who have been long engaged in this line of life, have never noticed these effects of the unrespirable gases on flame nor on their own persons; nor are they affected in any manner by the earlier and more offensive stage of the putrefactive process.

In the great medical schools of London, Paris, Edinburgh, and of this country, a large number of bodies are often collected in a single room, and this not always well ventilated. In these places, the most industrious and zealous students pass many hours of the evening and occasionally of the night, nor, if warm weather surprises them, do they desist. No exposure can be greater than these young men undergo; but they are not subject to fevers, in

any of these cities, nor under any of the circumstances mentioned. In Edinburgh the difficulty of procuring subjects for dissection compels them to continue the use of the same subject in a state which would be thought intolerable, and yet without injury to any one, out of hundreds within reach of the effluvia.

It may be asked, whether an atmosphere of this nature can be supposed to be equally healthy with pure unmixed air? This cannot be believed to be the case generally. Nature has destined us to breathe a certain proportion of oxygenous and azotic gases only. Therefore, every extraneous gas serves to diminish the purity of the air; but it does not necessarily infect it. The gases spoken of are not to be considered particularly favorable to health, but they are not deleterious; they do not produce specific diseases, such as fever, or pestilence of any kind. Nor can a slight degree of them be in any measure injurious to health, since we know that the respirable atmospheric air always contains a proportion of carbonic acid gas, a gas of all others the most fatal when taken by itself.

Prepared hides and dried fish, in an offensive state, have repeatedly had the reputation of generating malignant fever in this part of the country. There is not, however, one supposed fact of this kind, that I know of, which will bear a close examination.

In September, 1828, five or six fatal cases of malignant fever appeared in Boston, in a part of the town where the same disease broke out in 1798, 1802, and 1819. Among them was that of Mr. P., a custom house officer. He had been employed in the inspection

of merchandise on the wharves, near which this disease showed itself. It happened that some hides were discovered to be in an offensive state in a store on one of these wharves. An order was given to remove them immediately, and while this was going on, he repeatedly passed within the range of the offensive exhalations, and was greatly alarmed at the danger which might ensue. When Mr. P. died, which he did after a short illness, his death was attributed to the hides. Another gentleman, N. Tracy, Esq., belonging to the Custom House, was on the wharf during the whole time the hides were removing, and perceived the effluvia, but felt no inconvenience from it. The persons who handled and removed the hides, those who frequented the place where they had been stored, and others who came in contact with them, were in no way affected. The victims of that fever were, in fact, not persons exposed to the effluvia of the hides. They were individuals living in the street at the head of the wharves, running at right angles. They never saw nor smelt the hides; but they smelt the miasmata arising from the decomposing mass on the edge of the flats.

It may be asked, why persons living at a little distance from these wharves, along the edges of which the miasmata are generated, should be affected by them, while laborers on the very wharves escaped uninjured?

For this there are two reasons.

1. The miasmata ascend a little from the surface of the earth, and contaminate the atmosphere higher than the spot from which they emanate. Thus, Mr. Flint tells

us, the beautiful bluffs on the banks of the Mississippi are far more dangerous than the intervals between them and the river. 2. Miasmata exert their principal malignity in the first hours of the evening; that is, from sunset to about ten o'clock. This is a fact well known in Italy, and in many other places infected by malaria. The laborer retires from the wharf at sunset, while the inhabitant remains in the contaminated air, sitting, perhaps, at the window, to inhale the fresh evening breeze from the water, and drinking at every breath the insidious and fatal poison.

Badly preserved fish have been thought to generate malignant fever in their immediate vicinity.

The proofs of the non-pestilential nature of putrefying fish are abundant. In the State of Rhode Island and other places situated on the sea coast, the inhabitants carry on a great fishing with nets, by which hundreds of loads are landed at one place, and thence distributed to the vicinity. This business is pursued in August and September, that is, in the peculiar season of pestilential fever from miasmata. The fish are spread over the fields and allowed there to putrefy for manure. The air is made intolerable by the smell. The charm and comfort of the country, within reach of the stench, is destroyed. Every one who can conveniently avoid being exposed to it, takes some other route; but the laborer carries on his daily toil in the midst of the putrefying mass, without concern and without disease. The best proof of the absence of any pernicious consequence is, that the same process is repeated from year to year with increasing dili-

gence. Dr. Bancroft relates the existence of similar facts in the old world.

To the above shall I venture to add my personal experience. From an early period of life to the present time, I have been conversant with *dissecting rooms* and *decomposing bodies*, by day and night; often in ill health and under circumstances of great exhaustion; for weeks and months in succession; on subjects in every stage of decomposition, from the first taint, to a melting into a liquid mass; in midsummer as well as winter. I have also examined subjects dead of yellow fever, typhus fever, puerperal fever, and inflammation of the bowels, in the hottest weather and in epidemic seasons, and never have experienced any fever or febrile attack, excepting in a single instance. This occurred in Paris, in 1802, from dissecting at an open window, in very damp weather, in the month of January; in consequence of which I had a febrile affection of two or three weeks duration. The body I dissected was not putrid, and the room in which I was then engaged had no other occupant; so that the disease must be attributed to exposure to cold. When engaged over putrid bodies for some time, I have often experienced a sensation of debility and loss of appetite, but this has been very transient. During the present season, the weather having been unusually warm, the putrefactive process proceeded with a rapidity I have not often witnessed at the same period. The decomposing matters became so acrid as sometimes to excoriate the hands, produce small pimples, and very un-

comfortable feelings; yet no ill health ensued.

In the next number of this Journal, I shall produce extracts from distinguished writers, which will be thought, perhaps, more striking and conclusive than the facts above advanced. J. C. W.

See pages 17, 433.

II.

Case of Rupture of the Ilium from a Blow received on the Abdomen.

Communicated for the Boston Medical and Surgical Journal,

By GEO. W. OTIS, M.D.

MONDAY, July 21st, half past 4, P.M.—Called to visit James Rane; found him complaining of intense pain in the lower part of the abdomen. He was sitting on the bed with his knees drawn up, pressing firmly on his bowels with his hands, and writhing apparently in the severest suffering. His pulse was slow, feeble, and scarcely perceptible; countenance ghastly; bowels neither swollen nor tense. On inquiry, I ascertained that he had received a blow on the right iliac region, from the fist of a fellow-workman, about 11 o'clock of the same day. Nothing, however, was perceived externally but a slight abrasion of the cuticle. I had him immediately removed from a small, confined bed-room, to a larger and more airy room, below, and gave him some gin and water, that being the only cordial at hand.

I felt convinced, from the symptoms and general appearance of the patient, of the nature of the injury and its necessary speedy and fatal termination.

Shortly after taking the spirit, he revived a little, and the pulse

became fuller and more distinct. I bled him to the amount of six ounces; the pulse then failing and becoming less perceptible, I bound up the arm, and was obliged to repeat the stimulant. I directed him to be constantly rubbed with warm spirit, and hot fomentations to the bowels to be retained with firm compression. In a short time the pulse became better, and he appeared somewhat revived. He then took a drachm of the tinct. opii. I then left him, with directions to give him an enema of gruel as soon as it could be prepared.

At 7, P. M., I found him in as much distress as before, but he had been easier for a short time after my leaving him. Pulse fuller, and getting hard; bowels to the feel natural. Pressure could hardly be said to increase the pain; at least, the patient had not the power of evincing a higher degree of it than he constantly manifested. I repeated the bleeding to the amount of twelve ounces. It afforded no relief. It was now apparent, that if the extreme suffering of the patient could not be relieved or mitigated, vitality would speedily be exhausted. I gave him two drachms of the tinct. opii, in hot brandy and water, with directions to repeat one drachm every fifteen minutes till some relief was afforded. The frictions and fomentations were continued, and a free use of warm mucilaginous drinks was directed. The enema that was prescribed at the previous visit had been given and repeated, and had not been discharged. I now ascertained from the patient that he had had free evacuations from the bladder and bowels,

shortly previous to receiving the injury.

Half past 9, P. M., found him relieved; disposed to sleep; evidently under the influence of the opium; perfectly sensible; skin moist; respiration easy; extremities warm; abdomen not swollen, but now pain evidently much increased on pressure; pulse 130, distinct and less hard. Tincture as before directed.

Tuesday, half past 5, A. M. Patient in the intensest agony; had, however, remained, during the early and middle part of the night, stupidly quiet; had slept some, with intervals of delirium. Complains now of great pain in the scrotum; no external appearance of injury. I was prepared with a catheter, supposing it possible that some injury might have been given the bladder, which would prevent the voluntary discharge of its contents; but on inquiry I found that it had been freely evacuated during the night. No discharge from the bowels had occurred. Directed the hot applications to be continued; tinct. opii, one drachm every fifteen minutes, in hot spirit and water, and the enema to be repeated.

Half past 8. Visit, in consultation with Dr. Geo. Hayward. Patient nearly exhausted; extremities getting cold; pulse not perceptible; perfectly rational, and aware that he must soon die. Repeat brandy and water.

Death, half past 10, A. M.

Post-mortem examination four hours after death, in presence of my friends, the Drs. Hayward, Lewis, and Walker. On raising the abdominal parietes, the external surface of the intestines

that was exposed, presented the scarlet blush of recent and severe inflammation; they were slightly adherent from the effusion of coagulable lymph; a dark and sanious fluid was perceived in the cavity of the abdomen, floating in which were particles of apparently vegetable food. In order to ascertain with precision, and exactly the nature and situation of the injury, the intestines were very carefully traced from the stomach, downwards. At about the superior third of the ilium, a rent was discovered sufficiently large to admit of the introduction of the extremity of the thumb. No other derangement was discovered in the other organs contained within the abdomen. The other cavities of the body were not examined.

The rupture of the ilium was, of course, sufficient to account for all the symptoms of the case, and demonstrates most satisfactorily the diagnosis previously entertained.

In cases of rupture of an intestine, unaccompanied with a penetrating wound of the abdomen, no instances that I know of are recorded where recovery ensued. Indeed, if an individual, manifesting the most certain and positive appearances of such an injury, should recover, there would still be much room to doubt if, in this particular case, the intestine was actually ruptured. If the patient should survive the immediate shock which a blow, sufficient to produce such an injury, would impress on the system, the extensive inflammation which would almost immediately occur, and be constantly kept up by the contents of the intestines continually escaping into the peritoneal cavity, could not fail soon to destroy life. In

cases where great and severe injury has been inflicted on any of the important organs contained in the abdomen, the shock given to the whole system will, perhaps, manifest itself by a train of general symptoms pretty nearly alike. Thus, in extreme cases, the severity of the injury will at once exhaust the living principle to such a degree as to prevent any reaction, and death will, either instantaneously or in a very short time, ensue. In other instances, the system will, in a greater or less degree, react, and life may be prolonged from six hours, to two, three, or four days. Particular symptoms will show whether the continuity of the intestines has been destroyed,—whether the liver or its ligaments have been torn,—whether an important bloodvessel has been opened, or the bladder ruptured.

The indications of treatment, in the period of exhaustion immediately consequent upon the general shock, are, diffusible and general stimulants, internally given and externally applied, in proportion to the more or less depressed state of the system. When reaction occurs, perhaps the best treatment would be that which resulted from the supposition of the greatest possible injury having occurred, compatible with the continuance of life. This would be to adopt the most rigorous antiphlogistic measures. If the injury has gone beyond the point which indicated this treatment, art is of no avail,—the patient must die. The extreme suffering can only be for a short period partially mitigated by large doses of opiates and cordials.

Boston, January 12, 1829.

III.

SELECTIONS FROM FOREIGN JOURNALS.

Dysentery terminating in Gangrene, and Perforation of the Intestines.
—Encephaloid Tumor of the Liver, penetrating into the Thorax.
Cicatrix in the substance of the Brain.

JUL. HOULIER, *ætat.* 53, of an athletic constitution, and habitually in the enjoyment of excellent health, having, for three weeks, been affected with great debility, loss of appetite, pains in the bowels, and sanguineous diarrhœa, was, on the 11th of June, admitted into the Hotel Dieu, at Nantes. At this period he complained of anorexia, violent colic pains, and tenesmus; the abdomen was somewhat tympanitic, but not tender on pressure; the tongue was red and dry; the thirst violent; skin dry and hot; the pulse natural; the daily number of stools varied from ten to twelve. He had a large cicatrix on the right cheek, extending from the middle of the molar bone over the zygomatic arch, to the temporal suture; it was the consequence of a wound which he had received in the war of La Vendée. After the repeated application of leeches to the anus, and under the use of mucilaginous potions, the diarrhœa diminished, but the fever augmented, and delirium acceded.

On the 15th, the pulse was very full, strong, and frequent; the skin hot; face puffed up; conjunctiva injected; eyes bright; tongue red and moist; the abdomen was free from pain, and there was no diarrhœa, but furious delirium. The patient having been twice bled, the affection of the head and the fever subsided, but

the diarrhœa reappeared with increased violence and frequency; the stools were very *foetid*, and sometimes passed involuntarily; the abdomen was somewhat tender on pressure; six leeches were applied to it.

On the 24th, the countenance of the patient was suddenly altered, very pale, and expressive of the greatest anxiety; the abdomen was perfectly free from pain; the stools were involuntary, and had a truly gangrenous smell; the extremities were cold; the pulse could not be felt, &c., and in the evening he expired.

Inspectio cadaveris.—Under the cicatrix of the face the integuments were firmly adherent to the bones, and the squamous portion of the temporal bone consisted only of a very thin osseous layer, so that, on the least pressure, the scalpel entered into the cavity of the brain. The internal surface of the right temporal bone was rough, and covered with osseous and cartilaginous excrescences, to which the coverings of the brain were firmly attached. The pia mater was much injected, and contained a small quantity of serum. In the anterior and middle portion of the right hemisphere, a cellular intersection was found, corresponding with the external wound, and going through the substance of the brain towards the lateral ventricle, from which it was separated by a very thin layer of medullary substance. This intersection showed a large and compressed cyst, divided into a number of small cells, which were filled with a serous liquid, and the parietes of which were of such a delicate structure that they burst on the slightest pressure. The medullary substance

round this cellular intersection, and the other parts of the brain, exhibited no morbid alteration; the left lung was slightly adherent to the pleura, but in a healthy condition; that of the right was, at its inferior surface, firmly adherent to the diaphragm, by means of a fibro-cartilaginous tissue, which, having been divided, in order to obtain access to the aponeurotic centre of the diaphragm, the latter was found perforated to a considerable extent. The upper part of the right lung was healthy; its inferior lobe contained an excavation of the size of an orange, which was filled by a green, putrid, and very fœtid matter. The heart was healthy. The perforation of the diaphragm was an inch in diameter; its margins were softened, and in a condition approaching to that of encephaloid tumors. The surface of the liver was very rough, and adherent to the diaphragm, by means of a fibro-cartilaginous tissue, which being removed, an enormous excavation was found in the liver, communicating with the aperture in the diaphragm, and filled with a thick, putrid, pulsataceous matter. It occupied nearly the whole of the upper half of the liver, and presented, in its centre, a softened encephaloid tumor, which was united to the tissue of the liver by means of a very delicate cellulo-vascular texture, from which it could be easily detached. The peritoneum and epiploon exhibited some traces of inflammation, and the intestines were adherent to one another. The mucous membrane of the stomach, duodenum, and small intestines, was healthy; that of the large intestines was extensively ulcerated and gangrenous.

In the middle of the transverse portion of the colon there was an eschar of two inches in diameter, which, in its circumference, had produced a perforation. The vena cava contained a thick, dark-colored blood, in which some whitish matter was found, which had much resemblance to the liquid contained in the cavity of the liver.—*Révue Médicale*.

Epilepsy of fourteen Years' Duration—Recovery.

A woman, aged 55, was admitted in the month of September at La Charité, who had labored under daily attacks of epilepsy since the year 1814. When brought to the hospital she had two fits daily. During several years she had suffered from occasional attacks of hæmatemesis and uterine hæmorrhage. She was in good condition, her strength and digestion unimpaired, and no disease about the uterus to be detected by examination. Copious blood-letting was tried without benefit. Ten days after admission she was taken with the epidemic prevalent in Paris, and the epilepsy disappeared. The symptoms of the epidemic continued twelve days, after which a new series of phenomena presented themselves—namely, hæmorrhages from the different mucous membranes. Copious bleeding occurred from the nose, stomach, bronchi, vagina, and rectum; but these organs, except merely the discharge, showed no sign of disease. The epidemic complaint diminished during this time, and then disappeared. After this the hæmorrhages ceased; and, lastly, the patient quitted the hospital cured of the epilepsy and in good health.—*Med. Gazette*.

Retroversion of the Uterus.

A paper by Mr. Baynham, of Birmingham, was read before the Medico-Chirurgical Society, December 9, 1828, in which he described a case of retroversion of the uterus about the sixth month, attended with great difficulty in restoring the parts to their natural situation. The symptoms, from pressure on the bladder and neighboring parts, being extremely violent, Mr. Baynham at length, all other means having failed, introduced a trochar into the vagina, and punctured the uterus twice. It appears that both apertures were made through the placenta, a portion of the liquor amnii was evacuated, and the womb replaced in its proper position. The author stated, that in his attempts at reduction, he introduced the whole hand into the rectum; and alluded to a case in which the practitioner had introduced the whole hand into the gut, while an assistant *simultaneously* introduced his into the vagina! The author referred to several cases in corroboration of his proposal to puncture the uterus, when it cannot otherwise be restored; but cases in which any danger occurs from retroversion are so extremely rare, that the practice, even if good, can scarcely ever be necessary.

Chloruret of Lime and of Sodium in Burns.

M. Lisfranc, at La Pitié, uses these applications with great success. Yet the vesicles are not opened for three days, which is decidedly wrong: they should be opened as soon as formed, and the practitioner who has once tried this practice will constantly have recourse to it. The French begin with poultices, and, when the

epidermis is removed, keep the surface covered with lint wetted with the solutions above mentioned, whose strength should be such as to excite warmth. The practice of applying salt is as old as the time of Clowes, who dissolved it in onion juice, and considered it a "sovereign remedy" for burns and scalds.

Pustular Venereal Eruption, treated by the Subcarbonate of Ammonia.

P. M., 38 years old, emaciated, and of a very weak constitution, observed, in the month of July, a particular eruption on his forehead; this having been suppressed for a time, by a nostrum, the composition of which was unknown, soon returned again, with a tendency to form ulcers, and began to spread over the whole body. On his admission into the St. Louis Hospital, in September, under the care of M. Biett, he was in the following state:—Almost the whole of his body, but especially the inferior extremities, were covered with ulcerating pustules of different sizes; in the centre of each pustule there was a prominent, black, very hard crust, surrounded by a white ulcerating margin; the epidermis round the ulcers presented a copper-colored defined areola. In those pustules, where the crusts had been detached, the surface was excavated, much injected, and covered by greyish-white tenacious matter; the skin, between the pustules, exhibited livid blotches, the scars of former ulcers. The patient had, in 1814, successively been affected with gonorrhœa, chancre, and bubo, and had never had recourse to a proper mercurial treatment; he was married, and his wife, who

had borne several healthy children, had never presented any signs of infection. His general health was good.

M. Biett, having for some time employed cinnabar fumigations, and the alkaline bath, prescribed the subcarbonate of ammonia, from the use of which, he had, in similar cases, observed very satisfactory effects. The patient took a drachm daily, and this, being borne very well, and without the least disturbance of the digestive organs, was afterwards increased to two, and even to three, drachms. The crusts were gradually detached, and the excavated ulcers became more superficial, and assumed a healthy appearance; so that the patient, after having used the subcarbonate of ammonia for twenty days, was perfectly cured.

Psoriasis Inveterata successfully treated by the Arsenical Solution.

Xav. Host, ætat. 39, of a vigorous constitution, was, on the 7th of September, admitted into the St. Louis Hospital, under the care of M. Biett. Having, up to his eighteenth year, enjoyed good health, he observed, at this period, without any previous cause, a scaly eruption on his legs and thighs; the scales were very small, dry, of a whitish color, and slightly adherent to the skin, from which they were detached by the least friction, leaving some elevation and redness. In this state the patient continued for several years, without any disturbance of the constitution; sometimes, especially in winter, the eruption disappeared entirely; but, on returning, it insensibly extended over the whole body, and the scales began to change into thick crusts, which were firmly attached to the skin. During the last

three years he had been much addicted to drinking, in consequence of which the disease had become so serious as to induce him to seek for medical aid. When admitted into the Hospital he had, for the last six months, been in the following state:—The whole body, with the exception of the parts exposed to the air, and the genitals, was covered with large, irregularly oval crusts, of different thicknesses; their surface was beset with white scales, which, according to their longer or shorter standing, were more or less firmly attached to the parts beneath. The skin over the joints, and of the thighs, was covered with very thick, rigid crusts, with large furrows filled by a bloody ichorous matter, so that the patient was almost entirely deprived of the use of his limbs. His general health was not affected, his digestion was good, &c. After a bleeding of ten ounces, and the use of some aperients, M. Biett prescribed the arsenical solution, of which the patient took four drops daily, and this dose was afterwards gradually increased to twelve drops. The effect on the cutaneous disease was astonishing; the crusts, which before had been remarkable for their rigidity and torpid appearance, gradually detached themselves from the skin, leaving, at first, large red blotches, which were again covered with scales, but after repeated desquamation the integuments gradually assumed their natural color and appearance, so that it was found unnecessary to continue the use of the medicine for more than four weeks, after which period, the vapor-bath having been employed for some time, the patient was perfectly cured.

Journal Hebdomadaire.

IV.

REPORTS OF CASES IN PRIVATE PRACTICE.

Communicated for the Boston Medical and Surgical Journal.

Cases illustrating the Use of Ergot in Parturition.

1. MRS. S., the subject of this article, is the mother of several children, and in all her labors, excepting one, has suffered from floodings, either before or immediately after the expulsion of the placenta. In some of these cases she lost a prodigious quantity of blood, and remained in a state of collapse for several hours. She lost a sister in the country from the same cause.

On the morning of the 30th of last March, on getting out of bed, uterine hæmorrhage suddenly came on, and in a few minutes she lost a large quantity of blood. I saw her about half an hour after. She was lying on the bed, gasping for breath, the countenance very pale, and the pulse very feeble, but distinct. The surface of the body was cold. She was at the end of the eighth month of pregnancy with her tenth child. On making an examination, I ascertained that the placenta was not over the mouth of the uterus; the head could be felt through the neck of the uterus at the brim of the pelvis; the os tincæ was nearly closed, though dilatable, and the membranes were ruptured. She occasionally felt a slight pain. The flooding continued, though much more moderately than at first. From 6 to 9, A.M., means were employed to suppress the hæmorrhage, and to support the strength, with the expectation that the labor-pains might increase, and by delivering the patient, remove the cause of the danger. But, though the flooding was much lessened, it was not entirely checked, the pulse rather flagged than gained strength, and the pains, which slowly increased, were at long intervals, and had but little effect in dilating the neck of the uterus. It

became a question, then, what further was to be done. The flooding might possibly be restrained by the *tampou*, until labor was fully established, but then she would probably be exposed to flooding, either before or after the expulsion of the placenta, as had been the case in eight labors out of nine. There was no certainty that the plugging of the vagina would altogether prevent the hæmorrhage, and a small additional loss of blood might prove fatal. The only method of effectually checking the flooding, was that of turning the child, and by effecting the delivery, to remove the source of the danger. This operation was determined on, and it accorded with the opinion of Dr. C., who passed the house at the time, and was called in. At half past 9, A.M., the hand was introduced into the uterus, though the resistance at the neck of that organ was greater than was anticipated. There was no pulsation in the child. When the feet were brought down, a smart pain came on, which forced the head partly into the pelvis, and the child was rather doubled than turned. But this difficulty was soon remedied, by fixing a noose around one of the ankles, and drawing gently upon the string with one hand, while the other was employed in pushing up the head. So soon as the turning was completed, and before any attempt was made at extraction, a full dose of infusion of ergot was given. In about five minutes, its effect on the uterus became evident; strong contractions of the organ took place, accompanied by the *nisus* which is observable after the administration of that substance. The child was soon excluded, and it was followed almost immediately by the placenta and a large and firm coagulum. The uterus contracted to a small size, and remained so, though to secure its permanent contraction a second dose of ergot was given.

Immediately after delivery, Mrs. S. became exceedingly faint, and the

state of collapse continued for thirteen hours. At 6, P. M., the symptoms were, extreme paleness and coldness of the surface, hurried respiration, a thread-like and frequent pulse, and gasping for breath; but there was no restlessness or jactitation. At 11, P. M., reaction took place, after which she recovered, and left her chamber in less than a month.

As there was no perceptible flooding, either external or internal, after the delivery, the means employed to restore her were those of support and nourishment.

2. A lady of small stature, delicate organization, and feeble habit, was subject to flooding after delivery. I had attended her in six successive labors, in five of which this accident happened. The children and placenta, particularly the latter, were large. In one of the labors, however, the child was rather below medium size, and the placenta adhered firmly throughout its whole extent. It was taken away, and the stimulus of the hand, probably, produced so firm a contraction of the uterus as to prevent any subsequent hæmorrhage. In the first months of her tenth pregnancy, she was much reduced by cough, embarrassment of respiration, and hæmoptysis. These symptoms were removed about the seventh month, and she regained, in a great measure, her health and strength. As I was anxious to prevent flooding from taking place as usual, after delivery, because she had been reduced in her previous labors, from this cause, to an almost desperate state, I determined to try the effect of ergot. Labor came on at full time, on the night of the 16th of September last. I saw her at 8 o'clock the next morning. The membranes were ruptured about an hour before; the breech presented, and the os uteri was dilating. Fifteen minutes before 9, the breech having descended into the pelvis, I gave a strong dose of infusion of ergot. In a few minutes, the pains increased, and afterwards

became very frequent, with a constant effort at bearing down. The child was excluded at half past 9. Some delay was occasioned by the size of the head, but as regular pulsation continued in the cord, no great efforts were made to extract it. Another dose, but less in quantity, of the ergot was then given. The uterus felt firm. In a few minutes, contraction again took place, and a very large placenta was expelled. About six ounces of coagulum came with it, and the uterus immediately shrank to a small size. There was no subsequent flooding nor after-pains.

In this case, the child and placenta were both much above medium size, and in reasoning from the circumstances of her former labors, there is the greatest probability that flooding would have taken place, if the ergot had not been administered. G.

WEEKLY REPORT OF DEATHS IN BOSTON,

Ending February 7, at noon.

Jan. 30.	Sarah Harris,	34 yrs.
	George Hunt,	45
	George Smith,	49
	Martha Appleton,	81
31.	Hannah Tileston,	64
	Ephraim Wildes,	46
	Hannah Boyden,	85
	George W. Loring,	14 mo
	Anna McAdam Codman,	2 yrs.
Feb. 1.	John Hosea,	74
	Catharine H. Prescott,	4
	Mary E. Kamsou,	5
2.	Jeremiah Kahler,	86
	John Fisher,	65
	Catharine Lary,	85
	Sarah Down,	52
	Freeman Simpson,	12 mo.
	Angelina Harrington,	2 yrs.
	Daughter of Phineas Dow,	1 day
3.	Joshua Loring,	49 yrs.
	Edward Doyle,	46
	Cecil Cartle,	80
4.	Margaret K. Williams,	11 mo.
	Sally Skinner,	33 yrs.
	Joseph Harrington,	75
	Edward Leeds,	5 mo.
5.	James M. Bugbee,	22 yrs.
	Margaret Harris,	10
	Jacob Barstow,	40
7.	Sarah Peirce,	74

Apoplexy, 1—brain fever, 2—consumption, 5—convulsions, 1—enlargement of the heart, 1—infantile, 1—intemperance, 1—lung fever, 4—old age, 3—palsy, 1—unknown, 5. Males, 14—Females, 16. Stillborn, 1. Total, 31.

ADVERTISEMENTS.

CURVED SPINE.

DR. GRIGG informs the Profession that he has lately made a new and important improvement in machines for Diseases of the Spine. From his success in its application, and from the unqualified approbation it has received from the most distinguished Surgeons and Physicians in Boston, New York and Philadelphia, he confidently presents it to public notice.

The benefit attendant on its use convinces him that most of the cases of deformity dependent on curvature of the spine, may be perfectly cured, and many of those which have been considered incurable may by this apparatus be very much relieved. Feb. 8.

Boston, 30 Atkinson Street.

MEDICAL SCHOOL OF MAINE
AT BOWDOIN COLLEGE.

THE Annual Course of Lectures at the Medical School of Maine, will commence at Brunswick on Tuesday, February 24, 1829, and will continue three months.

Theory and Practice of Physic, by JOHN DELAMATTER, M.D., Prof. of Surgery Western Col. Phys. and Surg. N. York. Chemistry and Materia Medica, PARKER CLEVELAND, M.D.

Anatomy and Surgery, JOHN D. WELLS, M.D.

Obstetrics, JAMES MCKEAN, M.D.

Degrees are conferred, after the usual examination, at the close of the Lectures, and at the annual commencement in September.

The Library and Cabinet have received considerable additions, and the Lecture-Rooms have been enlarged, since the last course of Lectures. 4t.

Brunswick, Jan. 1, 1829.

LECTURES ON ANATOMY.

TICKETS of admission to Dr. J. V. C. SMITH'S Evening Lectures on Anatomy, may be obtained at BREWER & BROTHERS, Apothecaries, Washington Street. Feb. 17.

MANUAL FOR THE USE OF
THE STETHOSCOPE.

JUST published by Benjamin Perkins, & Co.,—MANUAL FOR THE USE OF THE STETHOSCOPE, being a short Treatise on investigating Diseases of the Chest. From the French of M. Collin, with an Introduction and Plates. By a Fellow of the Mass. Med. Soc.

The Stethoscope may also be obtained as above in the most approved form.

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Jan. 20.

SURGICAL INSTRUMENTS.

DAVID & JOHN HENSHAW & Co. No. 33, India Street, near the head of Central Wharf, have for sale a very extensive assortment of Surgical Instruments. Gentlemen wishing to purchase will find it to their advantage to call and examine them. Oct. 14.

CASEY'S APPARATUS FOR THE
CURE OF DISTORTED SPINE.

THE Proprietor of the Dormant Balance for the cure of Distorted Spine, gives notice, that he has established an agency in this city, for the convenience of those who may wish to avail themselves of this invention. Physicians having under their care the subjects of this disease, or patients themselves, may have an opportunity of inspecting the apparatus, and examining the testimonials of its efficacy, at Mr. Charles White's, corner of Winter Street. It is recommended, however, that all patients availing themselves of this invention, should do it by the advice, and under the superintendence, of their own physicians, as it is only by medical opinion that the proper subjects of the machine can be determined, or the other proper measures to be made use of in conjunction with it, can be pointed out. The Proprietor expressly disclaims the idea that a cure is to be effected, in any case, by mechanical means alone. This machine has received the approbation of many of the most eminent medical men in this city and New-York. Upon application to the agent, references will be given, and written testimonials exhibited.

All letters, post-paid, addressed to J. Lincoln, No. 27, Fayette Street, will be attended to.

Boston, Feb. 6, 1829.

Published weekly, by JOHN CORRON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

MEDICAL AND SURGICAL JOURNAL.

VOL. II.]

TUESDAY, FEBRUARY 24, 1829.

[No. 2.

I.

Facts relating to the Influence of decomposing Animal Matter in producing Fevers.

Communicated for the Boston Medical and Surgical Journal.

(Continued from p. 7.)

In the "Memoirs of the Society of Medicine" in Paris, and the "Annals of Chemistry," we find recorded some remarkable facts relating to the non-pestilential influence of decomposing animal substances. These having been introduced by Dr. Bancroft in his treatise on yellow fever, we shall avail ourselves of his translation, together with some remarks which he has connected with it.

"Many writers of celebrity have thought that no effluvia were so infectious and pernicious to mankind as those which issued from putrefying human bodies; and although a century and a half has elapsed since Diemerbroeck attempted to convince physicians that, at least, such effluvia could not produce the plague, yet the old opinion has kept its ground; and it is still believed, that, in their milder state, they may cause putrid fevers, and, in their more concentrated state, a true pestilence. There are facts, however, on a large scale, which com-

pletely decide this question;—two of these deserve particular notice.

"The first relates to the exhumations made in the church-yard of St. Eloi, at Dunkirk, in the year 1793; and the other to those made three years afterwards, in the church-yard of the Saints Innocens, at Paris. As the undertakings and results were similar in both instances, I shall, to avoid repetition, here describe only the latter, which I have preferred, because the corpses here taken up were much more numerous than at Dunkirk, and probably constituted the greatest mass of putrefying animal matter of which we have any accurate information.

"The church-yard of the Saints Innocens, at Paris, situated in one of the most populous quarters of the city, had been made the depository of so many bodies, that, although its area enclosed more than 1700 square toises, or near two acres, yet the soil had been raised by them eight or ten feet higher than the level of the adjoining streets; and upon the most moderate calculation, considerably more than six hundred thousand bodies had been buried in it, during the last six centuries; previous to which date, it was

already a very ancient burial ground.* Numerous complaints having been made concerning the offensive smells which arose from this spot, and sometimes penetrated into the adjoining houses, and the public mind having been greatly alarmed, it was at last determined to forbid all future burials there, and to remove so much of the superstratum as would reduce the surface to the level of the streets. This work was undertaken in 1786, under the superintendence of M. Thouret, a physician of eminence in Paris, and in two years he accomplished the removal of that superstratum, almost the whole of which was impregnated, or infected, as M. Thouret styles it, with the remains of carcases, and of quantities of filth and ordure, thrown upon it from the adjoining houses.

“ ‘The exhumations,’ says this gentleman, (in the narrative of them, which he published in the *Journal de Physique*, for 1791,

* In less than thirty years, more than 90,000 corpses had been deposited here by the last grave-digger. The poorer inhabitants were buried in coffins made of very thin deal boards, and were regularly stowed as closely as possible, upon and beside each other, in large pits about thirty feet deep, and capable of receiving each from 12 to 1500 coffins. These pits were gradually filled with coffins, and then covered over with earth, about one foot in depth, and the bodies left to putrefy. But as the same space was generally wanted, in fifteen or twenty years, for other bodies, this mass of animal corruption was then dug up, and a like number of recent corpses deposited in the same pit; and this operation was successively repeated through nearly the whole extent of the church-yard, from generation to generation, until the earth itself had been so completely supersaturated with human putrefaction, as to have no longer any action, or decomposing influence, on bodies buried there.

page 258,) ‘were principally executed during the winter, but a considerable part of them was also carried on during the *greatest heats of summer*. They were begun with every possible care, and with every known precaution; but they were afterwards continued, almost for the *whole* period of the operations, without employing, it may be said, any precaution whatever; yet no danger manifested itself in the whole course of our labors,—no accident occurred to disturb the public tranquillity.’ This account is authentic,—and was read before the Royal Academy of Sciences at Paris. It is, moreover, confirmed by the report of M. Fourcroy, who was joined in this commission with M. Thouret for certain chemical objects, which report was also read at the Academy, and is printed in the sixth volume of the *Annales de Chimie*. If this result from taking up nearly twenty thousand bodies, in different stages of decomposition, be insufficient alone for my purpose, there is another almost equally conclusive in its nature and extent. It is well known that M. Berthé, Professor in the School of Medicine at Montpellier, and two of his colleagues in that University, were sent, by the government of France, into Spain, to examine, and report upon, the nature of the yellow fever, which has proved so fatal in several towns of Andalusia, in 1800. M. Berthé has published the report of the commission, of which he was a member, and in it has mentioned that, being at Seville only a few months after the epidemic had ceased, he frequently visited the burial places just without the city, in which the victims of the

fever had been interred ; that, in these excursions, he was accompanied by the French Consul at that city, and had occasion to converse much with the guards stationed at those places, and with the grave-diggers still employed in them ; and he states that, besides these, many thousands of the inhabitants of Seville also come hither, some from curiosity, and others in processions, to testify their sorrow and respect for their departed friends. In one of these grounds, south-westward of the city, ten thousand bodies had been buried ; in two others, seven or eight thousand ; and in that of Triana, about four thousand.

“ ‘The heats of the spring,’ says M. Berthe, (which, I need not observe, are considerable at Seville,) ‘were, at this time, beginning to be felt, and the ground of these burial places being clayey, was already cracked into wide and deep crevices, through which a foetid odor was exhaled, the results of the decomposition which was going on among these heaps of bodies.’ ”

“ Filled with alarm at the calamities which might be produced by such masses of putrefaction, M. Berthé and his colleagues represented these supposed dangers to the Spanish government ; and then went to Cadiz, where they found the churches more or less filled with putrid emanations from the same causes ; but as they did not discover that these supposed fomites of infection were productive of any disease, their fears concerning them seem at length to have subsided completely ; for, in their reply to the President and Members of the Board of Health, who had requested a

statement of their opinion, they expressly declare their belief, that ‘if the yellow fever could be reproduced by the effluvia arising from putrefying bodies, it was evident that such a misfortune must already have taken place, through the imperfect manner in which the tombs and vaults, pointed out by them, had been closed,—a defect which they had observed in the churches that were most frequented.’ Thus, it appears that the putrid emanations from the bodies of many thousand persons, who had recently died of the yellow fever, did not, and therefore could not, produce that disorder.”

To the preceding facts I may add another, which is related by a man whose veracity is as little to be questioned, as his exalted philanthropy,—I mean John Howard, in his work on Lazarettos, p. 25.*

“The governor, at the French hospital at Smyrna, told me, (says Mr. Howard,) that, in the last dreadful plague there, his house was rendered almost intolerable by an offensive scent, especially when he opened those windows which looked towards the great burying ground, where numbers were left, every day, unburied ; but that it had no effect on the health of himself or his family. An opulent merchant, in this city,” adds he, “likewise told me, that he and his family had felt the same inconvenience without any bad consequences.”

If the exhalations from piles of bodies destroyed by the plague itself, and corrupting in the open air, were thus incapable of generating the contagion either of fe-

* Bancroft on yellow fever.

ver or of plague, even during the prevalence of a pestilential constitution of the atmosphere, (if any state of the atmosphere ever deserved that title,) it may, I think, be safely affirmed, that there are no circumstances under which putrid animal matter can be supposed ever to produce febrile contagion.

The following statement is extracted from a letter written to Dr. Bancroft by Mr. Lawrence, Anatomical Demonstrator at St. Bartholomew's Hospital, whose character, talents, and professional acquirements, have already, at an early part of his life, greatly and justly advanced him in the road to eminence. It was dated February 21, 1809.

"In a constant attendance at St. Bartholomew's Hospital for more than ten years, I have never seen any illness produced by the closest attention to anatomical pursuits, except such as might be expected to follow from a similar confinement and application to any other employment. When it is considered that most of the students come from the country, and that many spend much time in dissection, being employed also in writing, reading, &c. during the rest of the day, it will not be a matter of surprise that their health should occasionally suffer: but the indisposition has never appeared to derive any peculiar character from the exposure of the subject to putrid effluvia. Of course you will except from this observation, the effects which may arise from the absorption of noxious matter from wounds received in dissection. It has not appeared to me, that ill consequences of that description follow more frequently from the dissec-

tion of the most putrid, than from that of recent bodies, The following particulars will afford the most complete proofs that the exhalations from decomposing animal substance are not necessarily injurious to the human body.—John Gilmore, together with his wife and two sons, lived for ten years in a room under the anatomical buildings of St. Bartholomew's. The whole family slept, as well as spent the day, in this apartment, which received a very small quantity of light, in consequence of its single window opening against a high wall. The room was at the end of a passage, in which several tubs containing bones in a state of maceration were generally placed, and with which other divisions of the cellars communicated, containing large excavations for receiving the refuse of the anatomical rooms. The latter were not separated from the general passage by any door.

"The animal matters thrown into the receptacles just mentioned, are, I believe, converted into adipocire, and the feter is consequently not so offensive as if they went through the putrefactive process: but the whole place was constantly filled with a close cadaverous smell, very disagreeable to any persons who went down from the fresh air. During the whole day Gilmore was employed about the dissecting room, in removing the offals, in cleaning macerated bones, in short, in an almost constant handling of the most putrid matters. He always enjoyed good health, was fat, and possessed great bodily strength. He left his situation in consequence of an apoplectic attack, and died lately, at the age of 69,

after two other similar affections. His wife survived, enjoying a good state of health. Neither of his sons appears to have suffered from any unwholesomeness of their abode. They are both hearty and strong, although they have been employed some years in attending the dissecting rooms. But the whole family left the cellar soon after the father's first attack.

"During the time that our very numerous fleet of transports lay in the bay of Aboukir, many bodies of sailors who had either died, or had been drowned, were washed upon the shore, where they remained unburied, exposed to the heat of the sun. In riding to Rosetta, it was necessary to keep along the shore. I passed eighteen or twenty corpses in this situation. They were in various states of putrefaction; but the stench from them all was offensive in the highest degree, and extended to more than one hundred yards. My curiosity led me to approach close to most of them, that I might examine the changes they had undergone. Some were swelled up to an enormous size, and the skin seemed so distended, that it appeared ready to burst. They were often of a dark brown color; some had not yet come to that state; others had passed it; and the skin having burst in several places, the air had escaped, and they had become more or less desiccated, and of a black color. Every person who had to pass from the camp to Rosetta, was obliged to come within reach of the vapors emitted by these bodies. There were orderly dragoons constantly passing, yet neither myself nor any one else, as far as I could learn, was attacked with fever in consequence of our

exposure to these vapors; and my professional situation would probably have enabled me to learn if any such consequence had followed."

Orræus Descriptio Pestis, &c. p. 47. After stating that towards the decline of the plague in Moscow, in February, 1772, the College of Health received information, "*hinc inde in domibus emortuus et infectis—cadavera clanculum inhumata vel aliter occultata sepeliri;*" and that they ordered all the houses to be searched, offered twenty roubles to informers, "*et quæ (cadavera) in locis spatiosis non sat profunde inhumata fuerunt, eorum sepulchra terra multa contegere, cætera vero nuda reperta in cœmeteria transportare;*" he says, "*hac ratione circiter mille cadavera in habitationibus ipsis, reperta fuerunt. Notabile omnino fuit neminem et vespillonibus, vel aliis in negotio hoc periculose versantibus infectum nedum morbo aliquo corruptum fuisse, quamvis tanta ab omni infectione incolumitas vix ac ne vix quidem sperari posse videbatur.*"

In the Edinburgh Medical and Surgical Journal of October 1, 1810, may be seen an account, given by Dr. Chisholm, of a manufactory (of which I had some knowledge from the time of its first establishment) at Conham, near Bristol, destined for the conversion of animal flesh into a substance resembling spermaceti, by cutting up dead horses, asses, dogs, &c. and putting their muscular parts into boxes with holes for the admission of water, and afterwards placing them in pits filled with water, while the entrails and useless parts of many hundreds of carcases were left

to putrefy on the surface of the ground. And it appears from Dr. Chisholm's statement, as well as from other information which was given to me on the subject, that though the effluvia of these putrefying animal matters were highly offensive to the overseer of this manufactory, and to the workmen employed under him, as well as to others within their reach, no injury was done by them to the health of any person, during the two years in which these operations were continued.

-In regard to the morbid effects supposed to result from the putrefaction of fish, they appear, so far at least as regards fever, to have had no existence, but what was derived from the indiscriminating credulity of such writers as Forestus. That a large whale was formerly cast ashore, and suffered to putrefy on the sea coast, near Egmont, in North Holland, (a place nearly surrounded by marshy or low grounds,) I am willing to believe; but that the fever which is said by Forestus (tom. 1, lib. 6) to have followed that event, was produced by the whale rather than by marsh miasms, I cannot believe; because whales have not been found capable of producing such effects in later times, and because fevers from marsh effluvia constantly fall under our observation.

About the year 1788, a whale was stranded on the coast of France, near Havre de Grace, and M. Baussard, in an account of it, published in Rozier's *Journal de Physique*, for March, 1789, says, "*Pendant que j'étois occupé à dissequer ce gros animal, une leur phosphorique exhaloit de l'intérieur de son corps, et une odeur très fétide de la tête.*"

"*Les exhalaisons m'ont occasioné des inflammations aux narines et à la gorge et certaines parties huileuses de la tête m'ont mis les mains dans un état pitoyable.*"

No mention is, however, made by M. Baussard of any febrile affection, occasioned either to himself or to any other person, by the putrefaction of this fish; and that no such affections do, in fact, result from that cause, was farther proved by the information which I obtained on the 2d of October, 1807, at the Greenland Dock, where the late proprietor, Mr. Ritchie, (who had just sold this property to Sir Charles Price and his associates for 25,000*l.*.) informed me that for a considerable time all the Greenland ships had been used to boil their blubber at this place, for which purpose, five coppers, with proper coolers, &c., had been erected. Mr. Ritchie had lived more than fifty years in the neighborhood of this dock, was well acquainted with the boiling process, and assured me, repeatedly, that though the blubber is often in a very offensive state, emitting a highly putrid smell, neither himself nor his people, nor the crews of the Greenland ships, who perform the whole boiling, &c., nor the neighbors, have ever, to his knowledge, suffered in their healths from that operation; that his people and himself have always been healthy, and that he believes no crews are more healthy than those of the Greenland ships. This account was confirmed by the master of a Greenland ship then in the dock, who said he had been employed in the whale fishery for the last twenty-two years, excepting one year, and had been used to boil down the blubber for sixteen or

eighteen years of that time. He said besides, that the Greenland ships, on their return home, often smell very offensively to strangers, though to themselves the stench is imperceptible; that the casks in which they carry out their water, are those in which they have brought home the blubber; and that the water generally is found very offensive for some hours after the bung is taken out; in which state, however, the men are accustomed to drink it; and that, notwithstanding all this, he does not conceive that any men are more healthy than the crews of those ships; that the stench from the blubber is universally admitted to be greatest when it is boiling; and that these effluvia, so far from being at all unhealthy, are, on the contrary, reckoned so wholesome, that it is very common for sick persons to come to the copper, as soon as they rise from their beds, and to hold their heads over the steam as close as they can.

Mr. Ritchie informed me, that what remained of the blubber, after the boiling was finished, was now very commonly bought for agricultural purposes; that it was usually taken away by the purchasers just after the boiling, and was allowed to lie by a certain time, till it was in a proper state to be used as manure; when it was laid upon the ground, and found to be very useful.

The use of fish as manure is no new invention. Herrings, pilchards, and mackerel, have been long employed for this purpose in those parts of Great Britain where they are caught in the greatest abundance, and so are the various species of mollusca. In some parts of Cambridgeshire, &c., a

small fresh water fish, called stickle-back, (*gastrophilus aculeatus*), becomes so plentiful, that, leaving their native ditches, they form vast shoals in the rivers, and being caught in nets or baskets, are strewed over the ground, in the proportion of twenty bushels per acre. No morbid effect, however, so far as I can discover, has ever been known to result from the putrefaction of fish, or other animal matters employed in this way, though fevers ought to have resulted from it, if producible by the natural decomposition of animal substances.

Putrid human excrement seems equally incapable of producing fever. A night-man, who had been extensively employed for thirty years in this metropolis, assured me, that though his laborers frequently fell into asphyxia, or "died off," as he called it, they had always recovered on being brought into the open air; that no fever had ever ensued from such accidents, nor, as he believed, from this kind of occupation; that sometimes from intemperance, and getting cold, they had feverish indispositions, but not more so than other laborers; and that, when steady and sober, he thought them remarkably healthy; that their eyes were sometimes affected, so as to produce temporary blindness, from which, however, they commonly recovered in a few days; and that this, with asphyxia, were the only disorders to which he considered them particularly liable from the nature of their occupation.

The following extract from a writer on Egypt tends to show that the plague is not produced by animal decomposition:—"There are several writers who sup-

pose the plague proceeds from the canal or calige, which passes through Grand Cairo. It is very true that the remaining matter is horribly corrupted, by the filth thrown in from the adjoining houses, and the great number of necessities that empty themselves into it, which occasions a most abominable stench for several months of the year, tarnishing in a short time even gold and silver in the houses near it. But in this case also, a corrupt air is naturally commonly supposed to be the cause, which will likewise not agree with the above mentioned observation. At the same time another strong argument may be brought against it, which is founded upon a very long experience, viz. : All the houses of the European merchants in Grand Cairo have, for more than two hundred years, been situated close to this canal or very near it ; and neither have these, nor any of the other inhabitants, who live in the same situation, been more affected with diseases than the rest. This is a truth, which all the European physicians, who have for some time resided at Grand Cairo, will confirm."—*John Antes' Observations on Egypt*, page 38.

See page 33.

II.

Strictures on the Diseases of Young Children.—From Lectures delivered at Guy's Hospital,

By Dr. JAMES BLUNDELL.

Medical Diseases of Young Infants.

—To investigate and treat those diseases of young infants which fall under the care of the physician, is no agreeable task, for at this early age we are often surrounded with more feeling than

judgment ; and as the child cannot speak for itself, its complaints are sometimes involved in much obscurity. In fact, we are often compelled to investigate the complaints of young children much in the same manner as those of animals, by looking to certain external signs ; and of these, the following are the principal deserving your attention :—

The diseases of young children frequently exhibit marks upon the skin ; the surface of the body, therefore, ought always to be inspected ; and, in doing this, you may, at the same time, observe the degree of plumpness or emaciation, as well as the bulk of the abdomen, which is always large in infants. The body may be cooler than natural, and is frequently warmer ; this heat showing itself in the hands, feet, and mouth, and head more especially ; do not, therefore, neglect to inquire into the temperature of the child. Croup, hooping cough, measles, gastric cough, thoracic inflammations, and so on, of course affect the breathing, and to the action of the lungs and thorax, therefore, our attention should, in all cases, be directed. In convulsive affections, the scalp is hot, the fontanels beat more forcibly than the radial artery, even the hair sometimes grows very fast, and the head sweats. Inquire into all these points. In chylopoietic and cerebral affections, so common in children, the number and character of the stools change, and vomiting is occasionally produced. Infantile vomiting is of less importance than the vomiting of the adult ; and, it should be observed, that the rejection of coagulated milk, is no proof of gastric disease ; for coagulation is

one of the first effects produced by the healthy digestive juice. The actions of young children ought not to pass unnoticed. They raise the knees to the abdomen, when affected with colic; put the fingers in the mouth, when teething; pick the nostrils (when older) in worms or analogous affections; and when disposed to cephalic diseases, they may roll the head on the pillow, or frequently apply the hand to it. In young children, I pay but little attention to the pulse; even in health, it is nearly twice as frequent as in the adult; at birth, about 140; at the end of the first year, 120; of the second, 110; of the third and fourth years, about 96; in the seventh, about 86; in manhood, various, from 70 to 80 in the minute; and, in old age, sometimes as low as 60. When investigating infantile diseases, do not lose sight of the gums.

In young infants, opiates must be given with great caution; for though some, under convulsive and bowel affections, bear anodynes very well, there is always a fear of an overdose; from half a drachm to a drachm of good syrup of poppies, (not treacle and laudanum,) or two drops of the tincture of opium, are a full daily quantity for an infant within the month. Negligent assistants ought not to be employed to measure out the preparation; infants have sometimes been killed by overdoses; and still more frequently they have become drowsy, so as to neglect the breast and food for hours together, to their great detriment in bowel complaints. It is to be regretted that poppy syrup, so useful in children, varies so much in its strength and quality.

Leeches sometimes draw from

young children more than intended; and one leech may be too much when a child is much reduced. Dr. O'Berne, formerly of Chillington in Devon, asserts that, like the horse of Baron Munchausen, if the hinder end of the leech be cut away, it will draw more copiously; being a sort of living pump, which gives off at one extremity what it absorbs at the other. When leeches are placed over bony surfaces, the bleeding, (if necessary,) may be more easily restrained by pressure; and the hand, sternum, and cranium, are convenient places for their application. Besides compression and lunar caustic, a useful help for stopping the bleeding from the leech-orifices, is a small portion of clean sponge, easily passed down by means of a probe into the cellular web under the skin, where the bleeding vessels are situated. To Mr. Franks, one of my pupils, I was indebted for this fact. Infants are best bled from the external jugular vein, particularly in head affections; and when the blood can be drawn in this manner, we know precisely the measure. What quantities may be safely drawn at once, must be determined by circumstances; but the following tabular statement of quantities of blood which I have taken away myself, at different ages, may, perhaps, be of some use to you:—

From a child of	oz.	oz. aver.
2 months old, from 1 to	$1\frac{1}{2}$	
4 months . . .	$1\frac{1}{2}$ to 2	
8 months . . .	2 to 3	
12 months . . .	3 to 4	
18 months . . .	4 to 5	
3 years . . .	8 to 10	
6 years . . .	10 to 12	

For some of the facts on which this table is grounded, I am in-

debted to my friend, Mr. Edwards.

Beware of blistering infants, especially with eruptive diseases; if a child is under three years of age, you ought not to leave a blister on the skin for more than three hours together, without well considering what you are about. After removal of the blister, vesication will, I believe, generally ensue. Blisters, large and acrid, and of long application, are, it is to be feared, very apt to produce sloughing and death. Dreadful cases of this kind have now and then been brought under my notice.

The infantile diseases, like those of the adult, arise from causes exceedingly various; but, in most cases, irritability, acid acrimony, and errors in diet, have much to do in producing or modifying them. Children sometimes become gross and ailing because they are supplied too copiously with breast-milk; but far more frequently they suffer, because for human milk other food is substituted; marasmus and diarrhœa being the consequence. Children there are, and many, which thrive wonderfully upon pap; but some, and not a few, after two or three weeks' trial more especially, are found unfit for artificial food, and to them other food than the breast-milk is poison. Arsenic itself, though of more rapid operation, can scarcely produce more terrible effects than spoon-meat in such cases; excoriations of the bowels,—tormina,—diarrhœa,—death, not to mention dissolution from mere wasting. The rapidity with which children are brought back from death's door, under the use of the breast-milk, is, in some cases, very striking, and is a fur-

ther proof of its congeniality. So important is this aliment in these constitutions, that the milk should be drawn from a woman's breast, and given with the spoon or bottle, if the infant be too weak to suck. Within the first one or two months especially, no infant ought wantonly to be put upon spoon-meat. When there is purging, wasting, or cephalic affection, our first inquiry should always be, "What is the diet of this child?" If there is a wet-nurse, examine the evacuations, for when the breast is deficient, hirelings will sometimes clandestinely administer other food than the milk, nor can they be brought to confess it. All this is very shameful, no doubt. The nurse ought to be immaculate; or if otherwise, she ought to accuse herself; only look at the excellent examples which she sees every week-day, and the orthodox and edifying advice which she receives every Sunday. Pity it is that our intimate acquaintance and bosom counsellor should be a great rogue; but so thou art, poor human nature! Ah! that *pomum adamæ*, we may always feel it in the throat!

I can hardly acquiesce in the opinion of those who maintain, that the evacuations of infants are naturally ascendent; and certainly in health, the marks of acidity are at most very faint. Infantile evacuations, when natural, have much of the odor of new milk, and are of bright yellow tint. In some cases, however, these discharges become as sour as vinegar, and as green as this cloth, especially if breast-milk be denied; and cephalic or bowel-disease may be the result or the concomitant; it is always proper, therefore, in these affections, to

examine the evacuations generally, and more especially their acidity, giving antacids if necessary,—chalk if you wish to shut, magnesia if you wish to open, ammoniacal preparations if you wish to stimulate the older children, and carbonate of soda if you desire a remedy of powerful antacid operation.

“Varium et mutabile semper” —“pleased with a feather, tickled with a straw”—“genus irritabile vatum.” There is a great similarity between the nervous habits of women and children, and poets; and in all, much, and frequent, and various commotion is produced by small causes,—words, and looks, and accents, and a thousand other baubles; children, therefore, and those resembling them in nerves, become miserably obnoxious to nervous diseases. The proportion of the nervous system to the rest of the body is greater in the infant than in the adult. The cerebral vessels of the infant are much more prone to increased action than those of the healthy man; there appears, in earlier life, to subsist in the cerebral vessels, something of that irritability which is afterwards found in the mammaries and the pudendal. To these two causes, joined with a greater liveliness of the cerebral structure, the nervous temperament may, perhaps, be attributed; and in all cephalic and bowel diseases, therefore, great attention should be paid to the head, to its refrigeration, I mean, and the prevention or relief of the increased action of the vessels. Hence vegetable diet, leeching from the temples, bleeding from the jugular vein, evaporating lotions, and la douche; nor must anodynes be

neglected, nor the removal of irritants, particularly in the gums of older children.

The *strophulus intertinctus* is well represented in Bateman's plates, and is so common and gentle that it excites but little attention; cutaneous patches, of a red color, of an area varying between that of a split pea and a silver penny, constitute its principal character; in a few days the disease always ceases spontaneously. Do not confound it with measles. As there are no catarrhal symptoms nor febrile, and as the eruptions differ, the two affections are easily distinguished: look at Bateman's plate.—Nurses call the disease the red-gum. In the severer varieties there is a minute articular elevation in the centre of the red patch.

Cullen treats of the *icterus neophytorum* as if it were a very formidable disease; and cases with fatal organic disease of the liver may, perhaps, now and then occur. In infants, however, jaundice is never scarcely a dangerous disease, and it is of very frequent occurrence. Surely Haller is wrong in supposing that jaundice is produced in the infant by a clot of milk closing the D. communis choledochus; for when the skin is yellow, often the bile from the bowels is very abundant. The real cause of the icterus seems to be a redundancy of the bile under which a gorge and consequent absorption and reflux, are both of them produced in the same manner, as if obstruction existed in the passages. In a few days the yellowness vanishes: a tea-spoonful of castor oil may be given.

Flatulent colic is common in infants, especially if they are being poisoned by spoon-meat. Give

the breast-milk; change the nurse if the milk disagree. Dillseed water, and friction of the abdomen, are good carminatives. *Cantando rumpitur anguis*. Nurses fancy that a lullaby is of use on these occasions; it may soothe the nerves, and is not, perhaps, altogether without its efficacy. A fit of anger, or some other nervous commotion in the nurse may, perhaps, produce this disease; it alters the quality of the milk.

Hundreds of children are yearly carried off by *cerebral affections, convulsions, hydrocephalus*, or a mixture of the two. In some infants the convulsions become chronic, but far more frequently they are acute, of a few days or a few hours' standing. During the fit, the child is insensible; dragged about by spasms, with fixing, or staring, or partial closure of the eyes, and distortion of the features, which darken, and assume an ashy tint. The fontanel often throbs, and the scalp may be hot. There is evident analogy between these infant fits, and those of puerperal women. A single paroxysm may destroy, but more generally not so. When the child, in slumbering, is twitched gently, and smiles, and half discloses the eyes, and looks very charming—with rosy cheeks and brightened eyeballs, and a mind more active than ordinary, convulsions may be apprehended. These smaller symptoms are called inward fits. Our predecessors, besotted with superstition, always prone to ascribe nervous affections to demoniacal agencies, took it into their heads, that infants, when dosing, smiling convulsively, and starting, were holding converse with some airy being, charmed with their tender graces, and that the con-

vulsions which followed were occasioned by a desperate struggle to escape from his grasp. This explained why children, the most forward and beautiful, as before observed, are most liable to this disease. There is a very pretty catch, called the *Erl King*, which turns entirely on this piece of foolery. Evening is often the apparent cause of the cephalic affections in children, and to this, as the song runs, the infant is exposed. The reign of imagination is likely to cease, when that of knowledge is established, and then—the dull realities of life and feelings, like those of five-and-forty. The real cause of the beauty, the brilliancy, the precocity, the dissolution of the child, is the press of the blood towards the brain, and perhaps of the teeth towards the gums. This gives glow to the cheek and splendor to the eye, and activity to the intellect, and death to the mother's hopes. Among the lower classes of the South of Europe, if I am rightly informed, nothing alarms the mother more than the commendation of her infant's beauty. The dread of Nemesis seems still to prevail even in Christian Italy, and such praise is supposed, in some unknown manner, to exert malignant influence. I have myself more than once been told with tears, that just before the fit some friend had been remarking, "how pretty the child looks;" but enough of this. Tumors, effused water, effused blood, and accumulation, and hurried circulation in the cerebral vessels, appear to be, in most instances, among the more immediate causes of this disease; and of these causes, congestion and aqueous effusion are the most

frequent. Blood is, I believe, rarely poured out, and tumors are uncommon. All these causes, *perhaps*, operate by pressure, but I doubt. Full diet, damp air, irritation in the primæ viæ, dentition, hooping cough, measles, and other acute diseases, are the more common remoter causes, and the convulsive and hydrocephalic affections may arise without any very obvious excitement. The evacuations are generally knotty, mucous, serous, and green. Scrofulous constitutions appear to be especially prone to the disease.

(To be continued.)

III.

On the Secale Cornutum.

By GIDEON MANTELL, Esq. F.R.S.

To the Editors of the London Medical Gazette.

GENTLEMEN,

Although the publications of Dr. Neale and Mr. Mitchell have directed the attention of the profession to the use of ergot of rye, in protracted parturition, yet as this remedy, like every new one, will have many prejudices to encounter before it is allowed a place in the materia medica of the accoucheur, I beg to lay before your readers a brief statement of my experience of its effects, in the hope of inducing other practitioners to give it a fair and immediate trial.

During the last three months I have administered the ergot either in powder or in the form of tincture in about thirty cases, and the following is the result of my observations.

1. The *secale cornutum* has, in no instance, produced any alarming symptom; the powder

was a most effectual preparation in doses of from ten to thirty grains. The tincture was best adapted for a delicate stomach.

2. It never failed to excite uterine action, and, with the exception of two cases, expedite delivery. In twenty-three cases strong expulsive pains were induced in from ten to twenty minutes after its exhibition, and the labors terminated favorably in a period varying from a few minutes to an hour and a half. All these were protracted labors, in which the pains were either very slight and ineffectual, or had entirely ceased when the ergot was given; so that no doubt could exist of the efficacy of the remedy.

3. In plethoric habits, when the pains were frequent but unavailing, venesection was found necessary before the administration of the ergot.

4. In a case where much constitutional irritability prevailed, the medicine occasioned the most excruciating pains, apparently without expediting delivery; in other cases of this kind, a large dose of laudanum was administered, and when the pains had entirely subsided the ergot was given, and produced the happiest effects.

5. In abortions where the placenta was retained, the ergot checked the hæmorrhage and occasioned the expulsion of the after-birth: in these cases from ten to fifteen grains of the powder were given, and repeated according to the urgency of the symptoms.

In short, gentlemen, limited as my experience has been of the effects of the ergot, I cannot hesitate to express my conviction that this medicine possesses all

the properties that have been ascribed to it by its warmest advocates, and will be found, if administered with due precaution, one of the most valuable agents the accoucheur can possess.

Having some time since observed, in a contemporary medical journal, remarks from several correspondents on the most effectual means of suppressing uterine hæmorrhage after delivery, I would beg to offer to the *inexperienced* accoucheur a few observations on this important subject. In cases of uterine hæmorrhage the usual practice of removing the placenta with one hand, while firm pressure is made on the abdomen with the other, and the uterus grasped, as it were, till it contracts upon, and expels the hand introduced, the immediate application of a cloth, or bandage, round the body, and, when required, the free application of napkins, wet with cold water and vinegar, have, with but two exceptions, been the only means I have found necessary to employ in upwards of two thousand cases. In the instances alluded to, passive hæmorrhage continuing after the removal of the placenta, the vagina was plugged with pieces of soft napkins, and both the patients recovered. Nothing has appeared to me to be so effectual in the prevention of hæmorrhage and syncope as the simple expedient of having, at the commencement of labor, a cloth, or napkin, pinned or tied round the abdomen, so as to afford moderate support. *This should be tightened when the child is born, and firmly secured so soon as the placenta is expelled :* and I would strongly recommend the medical attendant to apply the bandage himself, and not leave it to the nurse. The practitioner

has now a most powerful remedy in the *secale cornutum* : whenever hæmorrhage is threatened after the removal of the placenta, a moderate dose should be given ; —under any circumstances it can do no harm.

IV.

SELECTIONS FROM FOREIGN JOURNALS.

Pathology of Dyspepsia.

1. WE have reason to believe that the muscular action of the stomach may be deficient, so that the alimentary matters remaining in it too long, are imperfectly changed, and pass into chemical decompositions.

2. There may be a deficiency of the intestinal action, interfering with the second stage of digestion, and giving rise to imperfect chylification.

3. The fluids may be deficient in quantity, or morbid in quality, so as to derange the process in various ways. We see in certain cases a fluid brought up in large quantities, in a morbidly tenacious state, quite different from the healthy appearance of the fluids of the stomach ; and we have reason to believe that similar changes may take place in the other fluids concerned in digestion.

If the mucous membrane be morbidly irritable, the muscular coat will probably be too easily excited to action. If this occur in the stomach, the articles will not be allowed to remain a sufficient time for digestion ; but after producing uneasiness, they will either be rejected by vomiting, or propelled in a half-digested state into the intestine. If the irritability occur in the intestine, the articles may undergo their proper change in the stomach, but will be propelled too rapidly through the intestinal canal, without time being afforded for the complete process of healthy chylification.

The following rules, although containing nothing of absolute novelty, are important :—

I. It appears that the muscular action of the stomach is both more vigorous and more extensive when its contents are in small quantity than when it is much distended; and if we suppose the fluids of the stomach to be secreted in nearly a uniform quantity, their action must also be greatly regulated by the quantity of matter which they have to act upon; hence the indispensable importance in dyspeptic cases of restricting the food to such a quantity as the stomach shall be found capable of digesting in a healthy manner. This is unquestionably the first and great principle in the treatment of indigestion; and without invariable attention to it, no other means will be of the smallest avail.

II. It appears that various articles of food are of various degrees of solubility in the stomach. When, therefore, digestion is apt to be easily impaired, it will be of the greatest importance not only to avoid articles which are of difficult solution, but also to avoid mixing various articles which are of different degrees of solubility. Attention to this rule will probably favor in a great measure the process of chymification going on in a regular and healthy manner, by avoiding a state in which the solution of one article may be more advanced than that of another. The articles of most easy solution appear to be solid animal food, and white fish, both plainly dressed; vegetables are less soluble; and among the articles of more difficult solution, appear to be fatty substances, tendinous and cartilaginous parts, concrete albumen, the epidermis of fruits, and, according to some, mucilaginous and sweet vegetables. From some experiments of Sir Astley Cooper, it is supposed that the solubility of animal food is in the order of pork, mutton, veal, and beef. Articles in small pieces are much more speedily dissolved than in larger, the action being more extensive at the circumference of the portion; and hence the importance of careful mastication.

III. If digestion go on more slowly and more imperfectly than in the healthy state, another important rule will be, not to take in additional food until full time has been given for the solution of the former. If the healthy period be four or five hours, the dyspeptic should probably allow six or seven. The injudicious infringement of this rule by a breakfast, a meat lunch, and a dinner, all within the space of seven or eight hours, is too obvious to require a single observation.—*London Medical Gazette.*

Flora Belgica.—The first volume of a work, under this title, has just been published, by two excellent botanists, MM. Le Jeune and Courtois, containing 597 species, arranged according to the Linnæan system, and extending, inclusively, to Pentandria polygynia.

TO CORRESPONDENTS.

Dr. Brewster's paper on *Abortion* is received, and will appear in the next number.—Ed.

WEEKLY REPORT OF DEATHS IN BOSTON,

Ending February 13, at noon.

Feb. 6.	John Bennet,	58 yrs.
7.	Eliza O'Donnell,	6
	Lydia Ellis,	73
	Sarah Carter,	48
	Azariah Dickinson,	77
	Mary E. Barber,	2 1-2
8.	Hannah Foot,	76
	Abel Billings,	50
	Theodore A. Simmons,	10 mo.
	Samuel Winslow,	6 w.
9.	John Hallam,	38 yrs.
10.	Hannah Lambert,	80
	Rebecca Dean,	70
	George M. Frost,	2 1-2
	Thomas Reed,	39
	Franklin Hastings,	2 1-2
	Kendall Pearson,	27
11.	Albert Douglas,	24
	Harriet Prescott,	24
12.	Joseph T. Edmands,	13
13.	John Hill,	2

Apoplexy, 1—convulsions, 1—consumption, 4—dropsy on the brain, 4—interperance, 1—inflammation on the lungs, 1—jaundice, 1—old age, 4—pleurisy, 1—suffocation, 1—unknown, 2. Males, 13—females, 8. Stillborn, 2. Total, 23.

ADVERTISEMENTS.

CURVED SPINE.

DR. GRIGG informs the Profession that he has lately made a new and important improvement in machines for Diseases of the Spine. From his success in its application, and from the unqualified approbation it has received from the most distinguished Surgeons and Physicians in Boston, New York and Philadelphia, he confidently presents it to public notice.

The benefit attendant on its use convinces him that most of the cases of deformity dependent on curvature of the spine, may be perfectly cured, and many of those which have been considered incurable may by this apparatus be very much relieved. Feb. 8.

Boston, 30 Atkinson Street.

MEDICAL SCHOOL OF MAINE
AT BOWDOIN COLLEGE.

THE Annual Course of Lectures at the Medical School of Maine, will commence at Brunswick on Tuesday, February 24, 1829, and will continue three months.

Theory and Practice of Physic, by **JOHN DELAMATTER, M.D.**, Prof. of Surgery Western Col. Phys. and Surg. N. York. Chemistry and Materia Medica, **PARKER CLEVELAND, M.D.**

Anatomy and Surgery, **JOHN D. WELLS, M.D.**

Obstetrics, **JAMES MCKEAN, M.D.**

Degrees are conferred, after the usual examination, at the close of the Lectures, and at the annual commencement in September.

The Library and Cabinet have received considerable additions, and the Lecture-Rooms have been enlarged, since the last course of Lectures. 4t.

Brunswick, Jan. 1, 1829.

LECTURES ON ANATOMY.

TICKETS of admission to **Dr. J. V. C. SMITH'S** Evening Lectures on Anatomy, may be obtained at **BREWER & BROTHERS**, Apothecaries, Washington Street. Feb. 17.

EUROPEAN LEECHES.

RICHARD A. NEWELL, Druggist, 91, Summer Street, has on hand a small lot of **EUROPEAN LEECHES**, in excellent order, and of very large size, which he will sell at a fair price.

N. B. Leeches applied as usual, or sent to any part of the city. 4t.
Feb. 24.

SURGICAL INSTRUMENTS.

DAVID & JOHN HENSHAW & Co. No. 33, India Street, near the head of Central Wharf, have for sale a very extensive assortment of Surgical Instruments. Gentlemen wishing to purchase will find it to their advantage to call and examine them. Oct. 14.

CASEY'S APPARATUS FOR THE
CURE OF DISTORTED SPINE.

THE Proprietor of the Dormant Balance for the cure of Distorted Spine, gives notice, that he has established an agency in this city, for the convenience of those who may wish to avail themselves of this invention. Physicians having under their care the subjects of this disease, or patients themselves, may have an opportunity of inspecting the apparatus, and examining the testimonials of its efficacy, at Mr. Charles White's, corner of Winter Street. It is recommended, however, that all patients availing themselves of this invention, should do it by the advice, and under the superintendence, of their own physicians, as it is only by medical opinion that the proper subjects of the machine can be determined, or the other proper measures to be made use of in conjunction with it, can be pointed out. The Proprietor expressly disclaims the idea that a cure is to be effected, in any case, by mechanical means alone. This machine has received the approbation of many of the most eminent medical men in this city and New-York. Upon application to the agent, references will be given, and written testimonials exhibited.

All letters, post-paid, addressed to **J. Lincoln, No. 27, Fayette Street**, will be attended to.

Boston, Feb. 6, 1829.

Published weekly, by **JOHN COTTON**, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

THE BOSTON

MEDICAL AND SURGICAL JOURNAL.

VOL. II.]

TUESDAY, MARCH 3, 1829.

[No. 3.

I.

*Facts and Remarks relating to the
Influence of decomposing Animal
Matter in producing Fevers.*

(Continued from p. 24.)

THE facts-stated in the two preceding papers are of some importance to the police of large towns.

Wherever considerable bodies of men are collected together, cleanliness is as necessary to health as it is to comfort. The means employed to obtain and preserve it, must be regulated by a knowledge of such facts as we have been calling into notice, and not by prejudices and visionary theories, such as form the basis of the police of a great number of cities, and the consequence of which must be an ill-directed expenditure of the public money. Large sums are appropriated to objects of comparatively small importance, and a disproportionate share is left for those which are great, and indispensable to the security of the public.

Let us apply the facts before stated, and the inferences which may be derived from them legitimately, to some of the objects of the police of large cities.

First, we may consider their application to the interment of dead bodies in the midst of towns.

Nearly all the well authenticated facts which have been stated, appear to justify the belief that burying places in towns are perfectly innocent in producing fevers or other malignant diseases. The case of the cemetery of the Innocens in Paris, taken alone, is quite sufficient to show that malignant fevers are not generated by such causes. At least, we must so consider it, unless we can adduce positive, countervailing facts. That cemetery, consisting of about three acres, received, it appears, six hundred thousand bodies: thirty thousand had been deposited within a short time,—ninety thousand within the life of one man. The soil was filled with, or composed of, an immense mass of animal matter, and this being elevated above the surrounding grounds, pressed in upon the cellars of the vicinity, and filled them with the salts and other combinations arising from animal matter. But, although the neighboring houses were greatly annoyed by the influence of this formidable accumulation, they were not the seats of fevers or other diseases, either common or contagious. When the inconvenience became so great as to require a remedy, then the bodies, in every stage of decomposition,

were taken up and removed, under strong apprehensions of ill consequences. These apprehensions proving to be unfounded, the removal was continued without any peculiar precautions, during summer as well as winter, and no disease either attended or followed this extraordinary disinterment.

This is not a solitary case. Similar occurrences have been noticed in other places, and they are abundantly sufficient to show that there is no ground for the apprehensions that burial grounds cause fevers or other diseases.

There is a mode in which very large collections of putrefying bodies may be mischievous in towns,—this is by contaminating the water of wells. The analysis of the water of large towns shows that a certain quantity of foreign substance, apparently animal and vegetable matter, is found to impregnate and render it impure. What are the principal sources of such impurities? I suppose them to proceed, first, from liquid filth thrown on the surface of the earth; second, from badly constructed drains in the vicinity; third, from neighboring vaults; and, lastly, from burial grounds, where the bodies are deposited in graves, or accumulated in masses in large tombs.

When the deposit of bodies is made in family tombs, it appears to me not only improbable, but nearly impossible that the putrefying mass can so much impregnate the soil as to penetrate by infiltration to springs or wells. If the tombs are placed under churches or other edifices, where the water from rains cannot reach them, there can be no infiltration, and of course no injury to the springs below.

It must be inferred, then, that the contamination of the waters of cities, from cemeteries in general, if it really exists, is very slight, and certainly less than what proceeds from other causes; that is, from drains, vaults, and house filth.

The case of the cemetery of the Innocens has been considered above to be conclusive, if no positive and satisfactory facts can be adduced on the other side. Such positive facts may exist, but I must confess I have no knowledge of them. During the last yellow fever of New-York, much was said of the fatal effects of the emanations from Trinity Church yard. The same apprehensions arose in regard to the burial grounds in Philadelphia, in the yellow fever of 1798, as already seen in the quotation from Dr. Rush, and the popular feeling, as is usual in such cases, became strongly excited. In conducting investigations of this nature, however, we are not to be influenced by popular prejudice, nor even by the opinion of a few medical men, who have preconceived opinions to support. The question should be, what is the opinion of the medical profession in general, or that portion of it which have experience to observe and judgment to discriminate. I do not recollect that the body of the profession have ever agreed in the admission of fever from a burying ground, in this or any country; and it seems that Dr. Rush, certainly an acute observer, was of an opposite opinion, and probably nearly the whole of the profession in the city in which he lived. Dr. R. believed that the vicinity of the burial grounds was more healthy than other places,

because the air in and about them was less confined. This opinion of his was founded on actual observation, and merits great attention ; for it shows that instead of being the sources of disease, the cemeteries are of real utility in cities, by preserving a number of spaces where the air may freely circulate, and where an abundant vegetation may serve to disinfect and purify the atmosphere.

The vegetable growth of burial grounds is indeed little more than the common herbage. Its influence, though not great, is of some value. If to this were added plantations of trees, the burial grounds would certainly be most useful to the public health. In what manner it is that the leaves of trees and plants render the atmosphere salubrious, has not been satisfactorily shown. That they actually change the qualities of air, by absorbing some of its essential or adventitious properties and exhaling into it others, is beyond a doubt. There is, also, much reason to believe that, under ordinary circumstances, a reciprocal and beneficial action is exerted on the atmosphere by the respiration of animals and plants. Trees must be considered, therefore, of great benefit to cities. They should be introduced wherever there is room for them. In public and open cemeteries they should be planted, both for the purpose of purifying the air by their leaves, and of imbibing, by their roots, the substances produced by the decomposition of dead bodies.

In connexion with this subject, we cannot pass over a report which has been circulated through the United States, copied, as it should seem, from a French jour-

nal. In this we are told that among the depuration of French savans lately embarked for Egypt, there is a commission of medical men, whose object is to ascertain the origin of the plague. At the head of this commission is placed M. Pariset, who has distinguished himself by inventing a *new theory* of the origin of the plague. He supposes this disease to be generated from the putrefaction of dead bodies, which, having been buried, are uncovered and brought to the air by the inundations of the Nile. He has been led to the construction of this theory, it is said, by the coincidence of the first appearance of the plague in Egypt, with the change in the practice of embalming for that of interring the bodies of the dead. This wonderful coincidence is, we are told, sufficient to justify M. Pariset in the doctrine that the plague is the offspring of animal decomposition.

To the physicians of this country, the statement of such a doctrine is a sufficient refutation of it. If there are any persons not conversant in medical matters who have been influenced by such a fancy, we refer them to the facts already quoted from different authors, and particularly to that which refers to the putresying substance thrown into the canal of Cairo ; and that in which it appears that officers and soldiers passed and repassed the bodies of the dead near the bay of Aboukir, in the most active putrefaction and the hottest weather, without ill consequence.

As to the fact that bodies are washed out of their graves by the inundation of the Nile, we know nothing ; but we do know that it is after the inundation of the Nile

that the whole country is filled with the miasmata from decomposing vegetables, rotted by the moisture of the Nile and the heat of the sun; and we also know that there is no inundation to uncover the dead bodies of the city of Constantinople, and other places, where the plague is continually appearing.

If M. Pariset is the same gentleman who belonged to the French commission sent to Cadiz and Seville, a few years since, to investigate the yellow fever, and who published a splendid quarto volume, with a number of terrifying engravings of this disease, it is to be feared his labors will not bring to light any important phenomena which have escaped the experience of RUSSELL and the sagacity of SENAC.

Let us next proceed to consider the application of the preceding facts to the vaults and drains of cities.

Vaults, constructed as they now are, and thrust into our very houses, by the habits and wants of large towns, are a most serious annoyance to the senses. Their effluvia is so generally experienced, as to afford abundant opportunities for proving that they do not generate fevers. Few persons maintain that they do so, and we shall not waste time in demonstrating the non-existence of a power which is not generally believed in. The harmlessness of such exhalations might be advanced as a proof, on a large scale, of the innocence of decomposing animal substances in causing fevers. We do not, however, consider them as affording any such proof; and not having a particular theory to support, shall not press into our service any facts which do not le-

gitimately belong to it. The contents of vaults are not animal substances; and, although in their chemical composition they are in some respects the same, the state in which their constituents exist is such as to compose a totally different matter.

Although not mischievous in breeding fevers, vaults are pernicious in another way; that is, by corrupting the wells. Their semi-liquid contents, accumulating as they do to a large mass, come at length to exert a considerable pressure on the soil around. Portions of liquids are, in consequence, forced into the neighboring earth; and when, as often happens, they are near to wells, they enter them, and impair the purity of, or in some instances wholly spoil the water. This may be prevented, as I am told by a medical friend, by additional boxing and curbing the well to the depth of about twenty feet.*

* The water of a large part of our wells is not the best qualified for use. The impurity introduced by animal and vegetable matters is generally slight, and may be removed by boiling. A more important impurity is that from the multitude of saline substances taken up in the passage of water through the earth, and which render it hard or brackish. Such water is always improper, and sometimes very injurious in complaints of the digestive and urinary organs. Clear rain water, and that of the aqueduct from Jamaica pond, is more conducive to health and better for cookery. A copious supply of good water would greatly improve the health of the citizens of Boston. In defect of this, every one who builds a house for his own use, should construct a large and deep a rain-water cistern as he can obtain; and he must take care to have it supplied from the higher parts of his edifices, and avoid that from low sheds and outhouses. In this way he may command an invaluable supply of the most wholesome water. Many persons object to the use of rain water as uncleanly; its cleanliness depends, however, on the manner

This improvement will not, however, be generally resorted to by those who build on speculation, and we must therefore seek some other remedy. Such a remedy may be found; one of general and easy application, which I shall presently indicate.

Common sewers and drains, or subterraneous passages for conveying away liquid filth, are of great importance in a crowded population. In Rome and some other European cities, these excavations are of such magnitude as to give passage to a cart and horses. Some of the cities of this country are well drained, while others are surprisingly neglected. In the city of New-York, the whole atmosphere is impregnated, in hot weather, with effluvia from house filth, thrown on the surface of the earth and stagnating in yards and streets. Such an atmosphere is very uncomfortable and may predispose to fever. That from this cause the yellow fever has ever been generated, I am not prepared to say.

Boston is tolerably well drained. Nature has given it advantages for carrying off its liquid filth which all cities do not possess. Many of the common sewers, and nearly all the house drains are, however, wretchedly con-

structed. They are composed of a channel between two rows of bricks, placed on a board and covered by uneven slates and shavings of wood. Liquids, of course, are not confined in this passage. They exude from its sides, penetrate the surrounding soil, and make their way into wells, cisterns, and cellars. Often we find a well is to be newly dug to get rid of a source of impurity, which might be expelled at a cheaper rate by building a good drain. Within a few years, a great improvement has been made by substituting the cylindrical brick sewer, which is impervious and durable.

These drains are used for conveying the washings of houses only. There is another important use to which they should also be applied,—the draining of the fluids of vaults. It has been already shown that these fluids make so great pressure as to force the walls which contain them, contaminate the surrounding earth, and sometimes find a course to neighboring wells. There is no mode in which this can so easily be remedied as by making a passage from the vault to the nearest drain. There should, I conceive, be an ordinance of the police, that every vault hereafter built should have an aperture, covered by a proper strainer, placed at a certain height from its bottom, and communicating with a drain in such a way as to carry off all the fluids deposited there into the common sewer. This plan would have three important advantages. First, it would prevent these fluids from entering the wells; second, it would lessen the effluvia, by conveying away the liquid and more volatile contents, and keep-

in which it is received and preserved. These individuals should recollect that the spring water is nothing more than the rains percolated through the earth; and their prejudices, perhaps, may be further diminished, by knowing that many cities, even in warm latitudes, are supplied wholly from this source. The prejudice against soft water, or, in other words, pure water, is so great in Boston, that I have repeatedly known a spring of the purest and softest water wholly deserted for another in its vicinity, which "had more taste," or, in other words, was brackish.

ing the mass more distant from the surface of the earth ; third, this would make it unnecessary to clear out these places frequently, and thus the city would be saved a great expense, and the senses of the inhabitants a horrible and frequent nuisance.

Should it be apprehended that a communication with the vaults would *contaminate the common sewers*, a consideration of the facts before stated will wholly remove the ground of that apprehension. The house-washings, containing vegetable matters, are far more dangerous to health than the contents of vaults. Even there is reason to believe that, so far from contaminating the sewers, the liquids from vaults diminish their bad qualities. Probably they, in some degree, decompose the vegetable miasmata. However this may be, it is a fact which I hold from the most intelligent and observing inspectors of the common sewers, that where the fluids from vaults have mingled with the ordinary contents of these receptacles, the effluvia, on cleaning them, is less offensive to the smell than usual.

Vegetable and animal substances of a solid nature are, in Boston, placed in temporary receptacles and carried away in carts. This is the only mode in which they can be disposed of ; but the temporary receptacle should be of a form and construction regulated by the police, and the vehicles should be kept in a more cleanly state than has been usual ; for the annoyance produced by them has been greater than that from any other nuisance to which the citizens are exposed.

The street dirt, in a northern city, and one in which the streets

are so much inclined as in Boston, is of little importance to health. For the sake of comfort, the streets should be sometimes swept, and the carcasses of dead animals should be daily removed ; but that excessive sweeping, which leaves the pavements unsupported and endangers the limbs of the good citizens and their horses, is neither necessary nor proper.

As these remarks are intended to aid in promoting the public health in Boston, it would, perhaps, not be thought irrelevant to advert to two topics, closely connected with the subject ; first, the effect of the vegetable miasmata about the city on the health of the citizens, and, second, the quarantine laws for preventing the introduction of contagious diseases. To consider these subjects with the attention their importance might demand, would too much prolong these remarks. In regard to the first, I will say a few words only.

The malignant epidemic fever, called yellow fever, which has occasionally shown itself in Boston to a limited extent, is caused by the *miasmata arising from the decomposition of vegetable matters*. These miasmata have been generated in a particular district only. Why they have not existed in other quarters, I will not undertake to say. Probably it is in this district only that the necessary degree of *heat*, combined with *moisture* and the *proper material*, is found to exist. I advert to this subject principally in order to state, that if a new street were made on the outside of the marshes or flats of the district where this disease has always appeared, and near to the sea-channel, the cause

of the yellow fever in Boston would probably be removed.

As to the quarantine laws, it is, I believe, generally agreed on by the medical profession, that in this country and in Europe they are based on false principles; of course, are more likely to produce than to prevent disease; and that they are a vexatious and useless interference with the interests of commerce. When the police of large cities shall be governed by enlightened observation instead of popular prejudice, the quarantine system will be revised, rendered more efficient, and less onerous.* There is, I suspect,

* The following is one instance of the unfavorable operation of the quarantine laws.

The summer of the year 1819 was hot, and some appearances of malignant fever in Boston, in the month of July, excited alarm. In the course of this month, arrived the ship *Ten Brothers*, from Africa, by the way of the West Indies, with a cargo composed of Coffee and other articles. Part of the coffee escaped its enclosures, and being acted on by the moisture in the hold of the ship, became offensive. In this condition, the vessel was made to perform quarantine the usual term in a burning July sun. The law, having been satisfied, the ship was allowed to enter Boston harbor; and measures were immediately taken to free her of the offensive bilge-water and putrid vegetable substances mixed with it.

Nearly all the persons who went on board that ship after the putrid substances were disturbed, were attacked by malignant fever, and to the number of ten or twelve died in from three to five days. Some died in Boston; two in Charlestown, near Boston; one in Portsmouth, sixty miles from Boston; one in Portland, a hundred miles from Boston, and one on Cape Cod. None of them communicated the disease to other persons.

Had the apprehensions in regard to this ship been directed, not to any supposed infection contained in her, but to that vegetable corruption with which she was charged, the evil would probably have been removed early enough to prevent the production of those fatal malignant fevers.

no place where a greater improvement in this department has been effected than in Boston.

The opinions expressed in this paper will, I hope, be found to rest, as they should do, on facts; and to be supported by the experience of my professional brethren. If they were the doctrines or the theories of an individual only, they would not and ought not to have that influence in public improvements, which otherwise they might be expected to do. Should a difference of opinion exist on any important point, I hope these remarks may have the effect to bring it forth; to exhibit the results of greater experience and sagacity, and thus to aid me in attaining the objects I have had in view,—the removal of prejudices and the promotion of the public health and comfort.

J. C. W.

II.

Cases of Abortion.

Communicated for the Boston Medical and Surgical Journal,

By Dr. WM. A. BREWSTER.

Mrs. ——— suffered an abortion Aug. 27th, 1826, at the close of the second month of gestation. She had very slight hemorrhage, and in about a week rode two miles in a chaise and returned at evening. She retired to rest, and was awakened from sleep by profuse hemorrhage from the uterus. She was pale, faint, and pulse almost imperceptible. Large cloths, dipped in cold vinegar and water, were immediately applied to the abdomen, which soon checked the flow of blood. Coagula were formed, plugging the os uteri, which restrained the hemor-

rhage until they were discharged, when the flooding was renewed. She continued in this alarming state for about seven days, without the true cause of the hemorrhage having been suspected. It was ascribed to riding too soon, before the bloodvessels of the uterus had regained their tone. But at length a coagulum protruded the external orifice, of more than ordinary size and density. A putrid smell being perceived, led us to suspect a retention of the placenta being the cause of the flooding. The mass that filled the os uteri was removed, and to our great satisfaction the hemorrhage ceased. It proved to be the placenta, which we supposed had been expelled with coagula at the time of abortion. The above case shows the necessity of careful examinations of the discharges after abortions, and of the importance of rest until the placenta is expelled.

CASE II. shows the effect of Sac. Saturni in curing uterine hemorrhage.

Mrs. — had an abortion before the end of the second month, which took place June 28th, 1827. The discharge of blood was moderate, and the placenta was retained. Manual assistance was of no avail, for it could not be reached. Frequent discharges of blood occurred, which were very alarming to the patient, although not very profuse. In about eight or ten days, the placenta was thrown off by the efforts of the uterus. Blood still continued to flow from the uterus at intervals, and sometimes a constant stillicidium for a considerable length of time. The patient was confined to a recumbent posture,

expecting the discharge, which was supposed to be of a lochial nature, to cease. But in this we were disappointed; and after waiting a reasonable time, administered calomel, sulphate of copper, alum, kino, and, by advice of a neighboring physician, tinct. canth. But my patient was still kept in a state of debility by frequent discharges of blood. I then administered sac. sat., 2 to 3 grs., ipecac., 1 gr.; opii, $\frac{1}{2}$ gr.; every six hours. This remedy soon had the effect of stopping the hemorrhage, and my patient convalesced.

CASE III. is noticed to manifest the effect of Ergot and Ens Venenis on a case of retention of the placenta, which occurred June, 1828.

In this case, the abortion occurred in the fourth month, the fœtus was expelled without profuse hemorrhage, and the placenta retained. The attending physician told the patient that the placenta was detached, and that a cathartic would cause its expulsion. The cathartic was taken, but the placenta was not thrown off. On the fourth day I was called, and on examination, found the os uteri to admit only one finger, and that the placenta could not be felt. There was no hemorrhage, but a violent oppression and spasmodic pain at the stomach. Opium, in large doses, gave relief. Another cathartic was administered, and stimulating glysters, but without any effect as to removing the placenta. A subsequent examination showed that the os uteri was enlarged, and the placenta could be felt, but appeared adherent and could not be removed. Ergot was administered, in as large doses as

the stomach could bear, for forty-eight hours, without causing any uterine pains or any perceptible effect on the placenta. I then directed *ens veneris*, *serum ammoniacale*, in teaspoonful doses, every six hours, to be taken in infusion of tansy. Uterine contraction was soon perceived by the patient, and on the second day the expulsion of the placenta took place.

Hampton, Conn., Feb., 1829.

III.

A Case of Idiocy following Epilepsy, with the Appearances on Examination after Death.

Communicated for the Boston Medical and Surgical Journal.

J. M. B. had been subject to epileptic convulsions from his birth to the time of his death, a period of about twenty-two years. Sometimes he would have several fits in the course of twenty-four hours; at other times, he would go nearly a month without an attack. His stature was about four feet only, and his body and limbs were small in proportion, excepting his hands and organs of generation, which were as large as of a man of full size. When calm and not provoked, (for he was easily excited to violent passion,) his countenance and figure, while standing up, exhibited most perfect idiocy. His knees partially bent, his toes inclining inwards, his shoulders protruding forwards, his head and face a little turned to the right side, with a pouting lip and tongueolling from his mouth,—all contributed to give the idea that mental capacity was wanting. In fact, his mind was exceedingly imbecile; though at times he would display a degree of cunning

such as could hardly be reconciled with his usual impotence. The marks of puberty appeared as early and as fully as usual, and he frequently exhibited great desire to gratify the sexual appetite. A few weeks before his death, he began to show signs of uncommon weakness, though without any increased frequency of the fits, which were soon followed by apparent great internal distress. He was unable to tell whence his uneasiness proceeded, yet it was evident from a continued wringing and twisting of his body, and his frequent loud groans. This state continued for a few days, when his limbs became cold and his lips purple, and he gradually sunk without convulsions. He became blind a short time before death.

Post-mortem Examination, fifty hours after death.—The head only was examined. External appearance, nothing unnatural, except its size, which was quite small. Internally, the dura mater was thought to adhere, with uncommon firmness, to the cranial bones. External appearance of the brain itself quite natural; but upon slicing the cerebrum, it was found much harder, or of much greater consistence than common, and that the medullary bore a far less proportion to the cineritious matter than is usual in sound brains. The septum lucidum had the appearance, and almost the consistence of cartilage. The lateral ventricle, on the right side, was natural, excepting, perhaps, it contained more water than is usual; but in tracing the posterior horn of the left lateral ventricle, at its extremity a hole was discovered, large enough to admit the end of the finger, which communicat.

ed with a membranous sac, of about the size of an English walnut, and which was filled with water. When the sac was pressed, the water passed freely into the ventricle. At its most extreme portion, that, viz., which was the posterior termination of the left hemisphere, the membranes of the brain only remained, and formed the sac in that portion of it, the substance of the brain there having entirely disappeared.

IV.

On Inflammation of the Placenta.

By S. J. STRATFORD, Surgeon.

THAT inflammation of the placenta will sometimes occur is, I believe, now placed beyond all doubt: the symptoms, and more especially the consequences, do not appear to be fully understood: perhaps, however, the circumstances attending the following cases may tend in some degree to illustrate them.

About the middle of June, 1828, I was called to Mrs. C. who believed herself in about the third month of pregnancy. She had been attacked with pain in the back, extending down the thighs; it had come on gradually, and was attended with symptoms of fever; such as a quick pulse, sickness at stomach, constipation, &c. These symptoms increased; she was attacked with cold shivers, and discharge of blood from the uterus: this and the pains increased; and after a short time an ovum was discharged, with its membranes, placenta, &c. The pains now somewhat subsided; so also did the hæmorrhage; but there was a degree of tenderness experienced upon pressure just above the

symphysis pubis. This, however, subsided after the administration of some purgative, and sudorific medicines.

Upon examining the ovum I found that the fœtus and all its appendages were present. The placenta was large, soft, and spongy; its surface covered with flakes of coagulable lymph: these were particularly marked upon its inner surface, while some were loose, and easily detached. The fœtal membranes I thought somewhat thicker than usual, and more opaque; the liquor amnii contained small portions of lymph floating in it. The umbilical cord was swelled; and the whole cellular tissue of the fœtus was loaded with a thin serous fluid; in some parts to the extent as almost to render it transparent.

Reflecting upon this case, I am led to conclude that inflammation of the placenta is sometimes a cause of abortion, and that the effects of inflammatory action in this membrane are similar to those which evince themselves in the other animal tissues. The disease appears in some degree to have extended to the structure of the uterus; as may be inferred from the pain on pressure, and febrile symptoms; while the effused lymph decidedly points to the part affected. A very curious, and not the less interesting point, is the effusion of serum into the structure of the fœtus—a kind of congenital dropsy, bearing a very considerable analogy to general anasarca caused by disease of the lungs. The similarity in function of the parts tend to convince us, that although it may differ as to the positive situation of its cause, the effects are the same. These conclusions are al-

so supported by a case which occurred to me while a student in London. I had engaged to attend a poor woman at her labor; when I first saw her she believed herself to be in about the seventh month of her pregnancy; she was particularly large, the abdomen being greatly distended. She had long experienced severe pains in the back, which I suspected might arise from the evident distension of the uterus. About a month after I first saw her, I was called to attend her: before I arrived the membranes had broken, and considerable quantities of water were occasionally discharged. The labor proved tedious, but the child was at last expelled; and I confess I was somewhat surprised to find, although alive, it was completely œdematous; its cellular tissue was filled with serum, as in a common dropsy; the distension of this texture was universal; while in all the parts endowed with a lax cellular tissue it was particularly remarkable. The respiration was very short and quick, evidently oppressed, while the whole of the child felt extremely cold. The umbilical cord was also swelled and full of serum, so much so that I found it difficult to restrain the hæmorrhage by the ligature. The child lived about three weeks, during which period a considerable portion of the serum was removed by the absorbents. The skin now was lax, and the countenance appeared shrivelled and ancient, while general debility was particularly marked; and it sunk without presenting indications of any obvious disease. The symptoms which here presented themselves I am now inclined to believe were caused by inflammation of the

placenta; much more chronic, however, than the preceding variety; and the morbid accumulation of the liquor amnii, in all probability, was connected with the existence of the same disease. Some of the symptoms nearly correspond with the description of the compact œdema of infants, as given by M. Leger, and I cannot help suspecting that future experience will confirm the fact, while it will be found that inflammation of the placenta afforded the mechanical obstruction to the foetal circulation which he imagined was a cause of that disease.

V.

SELECTIONS.

Rupture of the Uterus—Cæsarean Section.

At a meeting of the Medical Society of London, Nov. 17, 1828, Mr. Lord related the case of ruptured uterus, to which he had alluded on the preceding evening. The patient was 36 years of age. At the period when the os uteri was fully dilated, the vagina well lubricated, and a portion of the scalp protruding, all uterine action subsided. Three doses of the secale cornutum were administered, but without producing any marked effect: the parietal bone was felt at the brim of the pelvis. The vectis was used without effect. It was then deemed proper to perforate the head: upon examining, however, previous to this step, it was found that the head had got beyond the reach of the hand, and it was soon seen that all the evidences of a rupture of the uterus were present. Dr. Hopkins saw the patient at this crisis. Upon examination per va-

ginam, the uterus was found permanently contracted, and although the laceration of the organ could be discovered, it was not possible to reach the fœtus, which was lying in the cavity of the abdomen. It was then, in consultation, determined that the Cæsarean operation should be performed. An incision, half an inch distant from the linea alba, and extending to seven inches and a half, was made; the extremities and trunk of the child presented, and the head, in a very enlarged state from hydrocephalic effusion, was found to have been the cause of the protraction of the labor. During the operation not more than a teaspoonful of blood was lost; the placenta was easily detached, and the wound closed in the usual way. The patient expressed herself greatly relieved by the operation. Leeches were applied to the abdomen, and a mild nourishment given. For a time the patient appeared to rally; she had a quiet night; the pulse, however, was rapid; and death took place eight hours after the operation.

Medico-Chirurgical Society, December 9, 1828.

A paper was read "upon the Morbid Affection in young Children, resembling Hydrocephalus, but arising from circumstances of exhaustion," by Dr. Marshall Hall.

About the period of weaning, or from errors in diet, infants are apt to be affected with diarrhœa. This leads to a state of exhaustion; and in some of these cases there arise symptoms resembling those of hydrencephalus. A similar affection occurs in older children in the course of diseases

which have required leeches, purgatives, and other evacuant remedies, which equally induce a state of exhaustion.

In such cases the child dozes, the eyes being half open and unfixed; the conjunctiva is apt to become inflamed from exposure; the pupils are tardily affected by light. The countenance is pallid; the cheeks cool or cold. The unfixed state of the eyes is to be distinguished from strabismus; and the condition of the countenance is to be taken in connexion with the history of the case, in order to establish the diagnosis between this affection and hydrencephalus.

The diagnosis is highly important, for the recovery of the little patient depends entirely upon it. To treat it as hydrencephalus is inevitably to destroy life. Brandy alone can cure.

This affection is by no means rare. It has been slightly described by Dr. Abercrombie in his late work on diseases of the brain: otherwise it appears to have escaped the notice of medical writers. The author describes several interesting cases. The subject is altogether one of great interest and novelty.

Nux Vomica in Chronic Diarrhœa and Intestinal Hemorrhages.

M. Recamier, of the Hôtel Dieu, having learnt that the nux vomica was used in chronic diarrhœa by the practitioners of the north, administered it in the following case, and with success.

A man, fifty years of age, eminently nervous, had been long subject to alternations of bilious diarrhœa and intestinal hemorrhagy, which had reduced him to an alarming state; his lips and coun-

tenance were pallid. Sometimes the bilious flux preceded the hemorrhoidal discharge; at others, the order was reversed. Colombo, semirouba, and powdered charcoal, had been tried without effect. Opium, in the dose of a quarter of a grain, disagreed. One-eighth of a grain of the alcoholic extract of *nux vomica* was then prescribed. On the following day the stools were reduced from twelve or fifteen to three or four. The dose was then doubled, one-quarter of a grain given, and the patient was speedily cured by this treatment.—*La Clinique*.

Imperforate Anus.

Died at Woodstock, Conn., on the 27th, Ralph Alonzo, infant child of the Rev. Ralph S. Crampton.

The circumstance which occasioned the death of the child, was a peculiar and novel malformation in the inferior part of the pelvis, producing an imperforate anus.

The peculiarity of the case consisted in a tendinous ligament passing laterally across the lower part of the pelvis, about six or eight lines from the sacrum, and about one inch from the anus. To this ligament, the superior and inferior portions of the rectum were perfectly united. The obstruction was discovered about twenty-two hours after birth, by attempting to administer an injection per anum. Surgical aid was immediately procured, and upon examination, the tendinous cord could be felt; but directing the probe either anterior or posterior to this line, it might be introduced a little further up the rectum. Under these circumstances, it was concluded to attempt an opening by an incision: accordingly, a director was introduced, anterior

to the ligament, until it met with resistance; a sharp pointed bistoury was then directed up the groove of the director, and an incision made towards the sacrum. A portion of the meconium was then discharged, with the aid of the director. No motion of the bowels could be produced after the operation, and the child expired in about six hours. Upon examination after death, it was found that the point of the bistoury had passed through the anterior part of the inferior portion of the rectum, (which was extended at the time into the form of a sac, by the point of the director,) in front of the ligament; from thence it passed directly into the superior portion of the rectum, which was extended over the ligament in front by the meconium. Thus, a communication was not only made between the two portions of the rectum, but also with the cavity of the pelvis, producing a general effusion of blood throughout that part of the body.

BOSTON, TUESDAY, MARCH 3, 1829.

Compendium of Operative Midwifery; or, the Manual and Instrumental Operations of Preternatural Labors reduced to the greatest Simplicity; preceded by an Investigation of the Mechanism of Natural Labor. From the French of JULIUS HATIN, Doctor of the Medical Faculty of Paris, &c. &c. By RICHARD TUTE, M. D., formerly President of the Royal Physical Society of Edinburgh, &c. New-York and Boston. C. S. Francis and Munroe & Francis. 1828.

EVERY student of midwifery must have been struck with the elaborate minuteness of detail which characterizes French writers on this subject.

The remark applies especially to labor, the *mechanism* of labor as it is so appropriately termed by them. It hardly seems possible that the fœtus can present in any way, or that there is any portion of it which by any possibility can become the presenting part, which has not been distinctly pointed out by these writers, and the rule of practice laid down with a precision not surpassed in the most mechanical methods. One cannot but be struck, if he be not instructed, by the mathematical accuracy with which the pelvis, the fœtal head, and the mechanism of labor, are described in many of the earlier French authors. It is quite sufficient to refer to Levret and La Motte for confirmation of this remark. The diagrams, with their right lines, circles, and letters of reference, might almost lead you to suppose that a book on geometry had been put in your hands, instead of a humble, practical treatise of midwifery. These remarks are not made to detract from the high value of the works referred to. If studied faithfully, and they can never be understood by the common business of mere *reading*, let the case and the rule be once known, and exactly remembered, and an approximation to the same certainty which characterises much of operative surgery, will belong to midwifery. The work at the head of this notice is strictly French, and it presents in a very convenient form the peculiarities and excellences of the French system. To the student of English midwifery, which is characterised by generalization more than by detail, this work will, much of it, seem very obscure. The whole

language he will find new to him, and he will be led to ask himself, "can *presentations* be so numerous and diverse, and can I ever make them out in actual practice?" To those who have been taught after the system of Baudelocque, which is adopted at least by one of our schools, this work will offer great facilities of reference, and forms a neat, convenient manual. It may be further added, that as some patience, some study, will soon enable all pupils and practioners to avail themselves of its helps, it is hoped that it will be favorably received by the profession. Some slight errors and inadvertences were marked in the margin as we read the *Compendium*, but as the purpose of this notice is rather recommendation, than criticism, they need not be specified. In a future edition the translator will probably correct them.

The following extract, taken up without particular selection, will give the reader some notion of the work.

"General Rules for the application of the Forceps."

1. Whenever the head of the fœtus is placed in a direct* position, you must introduce in the first place the left branch with the left hand, and then the right branch with the right hand.

2. Whenever the head is placed diagonally, you must observe which extremity of its antero-posterior diameter presents forwards. When the occiput or the forehead is in correspondence with the left cotyloid cavity, introduce in the first place the right branch with the right hand, and then the left branch, which must also

* We shall always apply the term direct to those positions in which the occipito-frontal diameter of the head is found in the direction of the antero-posterior diameter of the pelvis.

be introduced by the right hand, for in all the diagonals you must introduce both branches with the same hand.

3. When the occiput or the forehead corresponds to the right cotyloid cavity, first introduce the left branch with the left hand, and then the right branch also with the left hand.

4. The branch ought to be so placed, that the old curve of the blades may correspond by their convexity to the concavity of the pelvis, and by their concavity to the convexity of the head.

The new curve ought to correspond by its concavity to the pubis, and by its convexity to the sacrum.

5. The hand which is free ought always to serve as a guide to the branches, and to be directed backwards towards the sacro-iliac symphysis; it ought likewise to be placed between the womb and the head, when the head is still enclosed in the womb, and between the vagina and the head when it has passed through the neck of the womb; in this manner you will most certainly avoid wounding the womb or the vagina.

6. Each branch of the forceps ought to be held, not as you would hold a pen in writing, but with a firmer grasp and with the whole hand, the thumb extended on the external side of the articulation.

7. The forceps ought to be warmed and lubricated by an unctuous substance, to facilitate its introduction.

8. The patient ought to be placed in the same position as for a manual delivery.

9. The accoucheur, when about to introduce the forceps, ought to be placed between the thighs of the woman; he directs the blade in the first place back of the head, and afterwards raises it upon its lateral region by means of the hand introduced into the parts. To raise the blade to the place which it should occupy, he glides his index finger behind its an-

terior cheek, the middle finger behind the posterior cheek, and the thumb under the latter.

10. When the instrument is applied, the accoucheur places himself to the right or left of the handle in the direct position, but constantly behind it in the diagonal position.

11. The hands of the accoucheur, in grasping the forceps when applied, ought to be placed differently in the positions of the superior and inferior straits. At the inferior strait, the hand which grasps the handle ought to be first placed under the instrument, while the other which is near the genitals ought to be placed upon it.

At the superior strait it is the contrary; moreover, the index finger of the hand which is near the genitals ought to be carried up to the head, in order to ascertain if it follow the movements which you are endeavoring to execute with the forceps."

WEEKLY REPORT OF DEATHS IN BOSTON,

Ending February 26, at noon.

Feb. 19.	Adeline E. Hartshorn,	17 mo.
20.	Ezekiel Car,	28 yrs.
	Michael Stone,	41
	John Pilsbury,	17 mo.
	Deborah Tufts,	
21.	Robie A. Butler,	18
	Jos. H. Hill,	15
	Mary Steel,	79 yrs.
	Mary Peirce,	20
	Elizabeth Mitchel,	33
22.	Barnard Hunt,	31
	Edward Strain,	2
	Elthier Holt,	4
	Lydia Petty,	40
	Daniel W. Colby,	6 mo.
23.	Hugh R. Kendall,	64 yrs.
	Son of Jacob Page,	6 w.
24.	Wm. Baker Ingalls,	5 mo.
	Hannah E. Daniels,	5
	Henrietta Keen,	22 yrs.
25.	Susanna Bennet,	54
	Thomas Roddin,	33
	Sarah Burge,	64
	Ann Lovering,	69
	John Clifford,	43
26.	Isaac Ridler,	21
	Samuel Hale Parker,	3
	Amanda Brackett,	

Convulsions, 2—consumption, 6—childbed, 1—debility, 1—inflammation, 1—inflammation in the bowels, 2—inflammation in the brain, 1—infantile, 1—lung fever, 5—old age, 1—palpitation of the heart, 1—sudden, 1—teething, 2—unknown, 2. Males, 14—females, 14. Stillborn, 1. Total, 29.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

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OR

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THIS Publication is intended for those who desire a periodical work which both in its form, and the nature of its contents, is more elegant and durable than the newspapers of the day, without, on the other hand, being confined to the more weighty subjects and elaborate criticisms to which our valuable quarterly journals are devoted. It is the intention of the Editor to unite instruction with amusement, and that those who read for either may obtain it in the Athenæum, from the pens of the most distinguished writers of the age, free from impure admixture, and without having their religious or political creed interfered with.

To those who know the high character of many of the English Magazines, a better idea of the nature of the Athenæum cannot be given than by stating that it contains the *Spirit* of these Magazines and those of Scotland; a preference being given by the Editor, however, to such articles as are best adapted to the American reader. It is thus designed to constitute a work which will unite the vivid sketching, the raciness and vigor of Blackwood, the sprightly and elegant genius, and the literary discrimination of the New Monthly, with the qualities of the various other journals of merit. The Poetry with which it is enriched cannot, while the names of the most gifted English poets are on the list of contributors to these Magazines, be otherwise than the best.

On the first of October last the Third Series of the Athenæum was commenced, on an improved plan, with new and handsome type. Since that period, the number published on the 1st of each month has been embellished with a colored plate, containing two whole-length Portrait-figures, representing the latest FEMALE FASHIONS. These are executed on fine paper, in a style highly ornamental

to the work, and are accompanied by full explanations. Other plates are occasionally introduced:—No. 2, of the present volume, is embellished with a Portrait of the late Bishop Heber, and the No. for the 1st of March with one of Thomas Moore, Esq. On the 15th of February, a piece of MUSIC was added, which plan, together with that of the Fashions and other plates, will be continued. The recent increase of its circulation among every class of the reading community, justifies the Publisher in believing that these improvements, combined with the value of its literary department, have rendered the *Spirit of the English Magazines* a pleasing and useful accession to the LADY'S TOILET, the DRAWING ROOM and the LIBRARY.

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February 28, 1829.

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RICHARD A. NEWELL, Druggist, 91, Summer Street, has on hand a small lot of EUROPEAN LEECHES, in excellent order, and of very large size, which he will sell at a fair price.

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DAVID & JOHN HENSHAW & Co. No. 33, India Street, near the head of Central Wharf, have for sale a very extensive assortment of Surgical Instruments. Gentlemen wishing to purchase will find it to their advantage to call and examine them. Oct. 14.

LECTURES ON ANATOMY.

TICKETS of admission to Dr. J. V. C. SMITH'S Evening Lectures on Anatomy, may be obtained at BREWER & BROTHERS, Apothecaries, Washington Street. Feb. 17.

I.

*Collections in Morbid Anatomy.**

No. I.

Communicated for the Boston Medical and Surgical Journal,

By WALTER CHANNING, M.D.

Case of Phthisis Pulmonalis.

J. F., aged 66, presented the following symptoms when first seen, Jan. 19, 1829. It may be premised, that he had been under treatment, immediately previous to this period, for retention of urine, and of which he was now free. He states that he has had some cough and dyspnœa for several years. Four months since, had catarrh, with much expectoration, cough, and dyspnœa,—now no distinct pain in chest, cough very urgent, especially in erect posture; copious expectoration, frothy, mucous; much dyspnœa; respiration laborious, rapid, wheezing; lying on left side increases dyspnœa. Tongue at root covered with thick, brown, dry coat; clean and moist at edges. No appetite; three dejections to-day

from ol. ricini. Pulse 66; skin soft, moist; countenance anxious, emaciated; sleep much interrupted by difficulties in thorax. Eruptions on thorax from antimonial ointment.

20th, 9, A.M. Pulse 72, intermitting; respiration laborious, with much rattling in throat, and often with a groan; very irregularly; more motion in the abdomen than among the ribs.

R. Antim. Tart. gr. i.

Pulv. Opii, gr. vj.

Pulv. Digital. gr. v.

Hyd. Submur. gr. xij. M. ft.

Pil. No. xij.

Two now, and two night and morning.

21st. Not relieved,—symptoms rather increased. Was bled to 3 xij.

23d. Some relief of dyspnœa from bleeding,—blood strongly cupped, ruffled at edges, buffed.

Very little relief at any time subsequently to last report occurred,—the disease became more and more aggravated, and the power to resist lessened. He sunk, and died Feb. 2d.

Examination fifteen hours, post-mortem.—On percussion of thorax, the left side resounded sufficiently well,—the right side well

* Under this head it is proposed to publish, from time to time, such original and selected cases in Morbid Anatomy, as may be interesting and useful to the profession. Communications for this department, as for all others, are requested from our contributors.—Ed.

was found to be increasing. Took medicine, by which the mouth was made sore ; made some external applications, all to no advantage. The swelling went on rapidly, though not attended with much pain. About three weeks ago, first began to feel sore in the right tonsil, and impeded deglutition. This has now increased to the size of a *shagbark*; is actually very troublesome ; hard ; not very tender. *Tonsil* red, but not as if about to suppurate ; has greatly diminished the isthmus fascium. Quite deaf in his right ear ; has had a blister applied behind the ear.

His general health has ever been delicate ; more deranged in spring for some years past. Countenance florid ; skin fair ; eyes blue ; pupil dilates largely. Says his family have never been troubled with glandular swellings.

This is not the common glandular swelling of the neck. It has about the size of an egg, though irregular in form, from the number of lymphatic glands affected. From the common glandular swelling it differs in its duration ; its hardness ; its connection with the tonsil ; in its painfulness, and disposition to affect the whole body.

The patient having been first relieved by a saline purgative, was ordered to take the muriatic acid in the following form :—

R. Acidi Muriatici, ʒi.
Aque distillatæ, ʒ viij.
Conserv. Rosæ, ʒi. M. et filtra.

Take half an ounce once in two hours. Inhalation of the steam of hot vinegar. Gargle of decoction of chamomile.

Three leeches to the external tumor, and afterwards a poultice

of bread, water, and sea-weed, applied warm, every four hours.

When the inflammation of the tonsil is somewhat reduced, to take three grains of the Hydriodate of Soda, three times a day, and the tepid sea-water bath.

Swelling of the knee.—Mr. Garr, laborer, Boston, æt. 30. About 21 months since, patient slipped from a chair and came upon the inner condyle of the femur. Felt no pain at the time, and was not lame after the accident. He noticed nothing till about two months since, then felt a darting pain, extending upwards and downwards from the joint. This pain not constant. In a short time, noticed swelling between patella and inner condyle of femur. A day or two after this, was obliged to work in water for some hours. Immediately after this, pain and swelling increased, and lameness ensued. He then applied N. E. rum a few times with great relief ; has done nothing since. Swelling has increased more at times, particularly after an exposure and cold. At present, knee not very sore, but tender. Tibia and fibula natural ; motion difficult ; whole joint about two inches larger than the natural size.

This patient is so lame as to be disqualified for pursuing the occupation by which he has gained his living ; and though respectable in his character, was reduced to a state of great poverty and privation, till he fortunately met the eye of a humane gentleman, who advised him to the hospital and procured him a bed there.

The enlargement of the knee is general, and for the most part hard. No texture seems to be

affected exclusively, but all partake in the derangement; of course, the case will be difficult and slow of remedy.

The patient's health being good, no internal remedies are advised at present.

He is first to maintain perfect rest in the horizontal posture; second, to have a tepid sea-water fomentation twice a day, followed by friction continued half an hour, at each time.

Fungus Hamatodes on right leg, outside, and eight inches below knee joint.—Mrs. D., æt. 50. Little more than a year since, bruised the limb against the wheel of a waggon. The part was considerably discolored, and patient lame for three or four weeks. Often struck the part when carrying a bucket, and thus kept up an irritation for a time in the part; made no application, but as lameness subsided, thought all was well. About two months from the time she was hurt, while accidentally passing the hand over the leg, perceived a tumor as large as an acorn. It was hard; not tender to touch; skin white and shining. Showed it to a physician a few days after, who called it a *scrofulous wen*, and proposed to remove it, but patient would not consent. He made some application and left her. From this time it increased very fast, retaining the same aspect. Saw Dr. Kittredge. He ordered salt water bath, ointment, &c. This had no effect in retarding the growth, but in keeping it cool. Saw Dr. Whiting, of Haverhill. He ordered showering, otherwise perfect quiet to the part; but notwithstanding, continued to grow, retaining same external appear-

ance. At this time she chanced to fall in with a *quack*, who attempted to produce suppuration. While under his treatment, and when as large as a goose egg, it changed its complexion; became very red and hot; bloodvessels began to show themselves. This happened about five months since. From that time to this, has made several trivial applications. Began to bleed about three weeks since, and has continued; it is now as large as an infant's head; of a sublivid appearance. Pains shoot from it to the groin and ankle, and, as she thinks, affect every part.

General health not very good.

This interesting case was sent to the Hospital by Dr. KITTREDGE, of Andover. This gentleman having detected the dangerous nature of the disease, informed the patient that unless removed speedily, it would prove fatal. He then wrote to Dr. Warren, stating the case and the destitute condition of the patient, and requested a free bed for her. This being immediately obtained, the patient came to the Hospital on the 2d of March.

The aspect of the tumor was truly formidable.* Its circumference about sixteen inches. The fungous protrusion through the skin, which had appeared within a few days only, had already attained the size of six inches in circumference. The color of the fungus was a dark red, intermixed with purple; that of the tumor, still covered by the skin, was variegated with red, green, purple,

* A drawing has been made of this fungus, which we shall, perhaps, publish hereafter.

blue, and white, richly intermixed. Whenever the dressings were removed, the fungus bled in a copious manner, sometimes till the patient was quite exhausted.

On the 5th of March, a meeting of the consulting physicians being called, Dr. WELSH and Dr. WALKER attended; who, with the assistant surgeons, Dr. REYNOLDS and Dr. OTIS, proceeded to examine the tumor, and decided in favor of an immediate amputation.

The operation was directly performed by Dr. WARREN, as follows:—The patient was placed on a firm table, of convenient height; the pelvis brought as near as possible to the edge, and the patient's arms and shoulders well supported by two assistants, to prevent her from slipping forwards. The leg was firmly and carefully held by Mr. PARKER, the house surgeon. The care of compressing the femoral artery in the groin was confided to Dr. Reynolds; and that of supporting the integuments of the thigh and the flap, to Dr. Otis. The operator, standing on the right side of the patient, placed his left hand on the thigh, so that the edge touched the patella; then raising the hand to the line indicated by the superior edge of the hand, there he applied the knife, carrying it round the inside of the limb, and then with a sweep along the outside, so as to divide precisely the skin all around. Next, setting the instrument on the muscles exactly below the retracted skin, he divided the muscles on the fore part, and with a second stroke, on the back part of the thigh. Drawing up the skin and muscles with the aid of the assist-

ant, the knife was carried through the remaining muscles to the bone. A retractor of linen was directly applied, and being taken by the assistant surgeon, was strongly drawn upwards, especially on the back of the limb. Finding a slight protrusion of muscle through the retractor about the bone, this was divided by a scalpel and the saw applied to the bone. This being supported by the left hand of the operator, was, by short strokes, entered into the bone; and being fixed, the strokes were lengthened gradually and deliberately. Now, the assistant, slightly inclining the leg upwards, caught the saw, but immediately correcting the position, the sawing was completed.

The retractor was then taken off and a tenaculum passed through the coats of the femoral artery; this vessel was drawn out and carefully tied with a silk ligature, one end of which was cut close to the artery, the other brought out of the wound. Another artery of some size was then tied. The pressure in the groin being removed, no other artery bled, excepting a small one in the subcutaneous cellular membrane, in which it was buried. This being drawn out, a small ligature was applied; but immediately the patient screamed violently. Perceiving there must be a small nervous filament included, the operator cut off this ligature, drew out the cellular membrane with a tenaculum, and from the midst of it separated the little artery by a forceps, and a ligature was again applied; but the patient cried out as before. Finding that the filament was very small, it was not thought expedient to repeat the attempt to exclude it.

The ligature was drawn as tight as possible and the pain ceased.

The artery had been so effectually compressed in the groin, that scarcely any arterial blood was lost. Finding, however, that the veins bled freely, a circular bandage was at once carried a few times round the stump, and this venous bleeding was stopped.

The patient was put to bed for three hours; then the dressings were applied, of adhesive plaster and bandage, as usual. No hemorrhage followed. At the evening visit, the patient was free from pain and comfortable.

The circular and the flap operation of the thigh have been tried alternately at the Hospital for some time back. On a review of these operations, the preference is given to the circular for the following reasons:—First. The wound made in this mode is not so vast. Second. The hemorrhage is less. Third. The incisions are more regular and precise, than in the flap operation. Fourth. The constitutional affection, and, of course, the danger, is less, in the circular, than the flap operation. The last can be done quicker, and makes a good stump. These advantages do not overbalance the objections. Whether the operation is a minute and a half or four minutes in duration, is not so important, as that the patient's safety should be ensured. When the operation is done as above described, all the incisions are smooth and exact; not the least irregularity of muscle appears on the face of the stump; and the covering of muscle, cellular membrane, and skin, is as perfect as possible.

II.

Case in which the Tincture of Iodine was externally used.

Communicated to the Editors of the Boston Medical and Surgical Journal.

In your last number were published some extracts from a work, on the use of the Tincture of Iodine in diseases of the joints, &c. I had a case under treatment at the time I read the notice, which I thought might be benefited by Mr. Buchanan's plan. The following is a brief account of the case and the effects of the Iodine.

T. R., aged about 14. Has for three or four years or more been annoyed with rheumatism. His family is rheumatic and gouty. Has had himself chronic rheumatism in many joints, the smaller as well as the larger. The knee was long afflicted in this way. Great enlargement and stiffness, but not much pain, followed one of the attacks. Effusion took place, and an imperfect pus was at length discharged from a small and round opening. This was slow to heal. Similar trouble occurred to one toe, and the top of the foot of the same limb. The whole aspect of this boy was bad, and I was not a little surprised, as well as gratified, at his progress to recovery. This was perfect. He had been greatly emaciated, pale, and feeble, resembling most truly, in his whole appearance, the cases of scrofula, with imperfect nutrition, we so often meet with. He grew fleshy, with good complexion, and was as active and happy as any of his mates.

Rheumatism attacked him again some months since. It pursued very much its own and its old

course. It subsided at last, leaving his left elbow stiff, some swollen, with the forearm bent at a right angle with the humerus. This had been long the case when I saw him. I was called to see the father, laboring under acute rheumatism, when I was asked to look at the boy, Thomas. I have described the state of the elbow. His general health was better than common after an attack. All I recommended was friction, with daily attempts to move the joint. Much was done by this course. The swelling slowly subsided, and the angle of the elbow, from 96 deg., became one of 45. At this time I saw the use of the Tincture of Iodine recommended, and though something had been gained after a pretty long trial of the above means, I determined to try the Tincture of Iodine, after the method of Mr. Buchanan. It was tried three times, at intervals of about fourteen hours,—the strength of the tincture being one drachm of iodine to three ounces of rectified spirit, applied by means of a feather.

Slight swelling followed the first application, more the second, and so much the third, as to excite much alarm in the friends, and to give the limb a truly formidable appearance. The whole arm was swollen, from the top of the shoulder to the hand, and part of this last. The skin was tight, at first glossy, and then covered with miliary vesicles. It was very hot, and itched and smarted. Any considerable motion of the arm produced rupture of these vesicles; and especially when an attempt was made to bend the arm, a large discharge of water took place. It was most considerable from the inside of

the elbow joint. General irritation was manifested, by heat of surface, flush in face, thirst, dry tongue, &c. He was also costive. Means were at once used to diminish the local disease, and to evacuate the bowels. These consisted in solution of acetate of lead by day, poultice of same at night, and a saline cathartic draught. The second day the general symptoms had much yielded, and the swelling, &c. have since continued to decline.

The immediate effects of the Iodine were more severe from this mode of using it, viz., tincture applied by means of a feather, than I have seen from any other use of the remedy. It was probably applied too often,—a day, at least, should intervene before it be repeated. But in this case, local symptoms appeared immediately, and the constitutional ones were considerable. There might have been something in the patient that aided in the production of the severe symptoms recorded. The case is given for caution. No such effects are mentioned by Mr. Buchanan. The limb should be carefully watched, and the remedy lessened or discontinued when any local effects begin to manifest themselves. If any further circumstances of importance occur in this case, I will send them to you for publication.

Yours, &c.,

A. B.

March, 1829.

III.

Lectures on the Nervous System.

It is generally known that Mr. Charles Bell has offered to the public many new views respecting the nervous system. These views are

founded on a vast number and variety of experiments. Mr. Bell the last year gave four Lectures on the nervous system to the London College of Surgeons. Abstracts of these have been published. The following is the Introductory Lecture on the subject.

Mr. President and Gentlemen,—You perceive by the preparations and drawings around me the subject of the lecture. I have deferred to the very last my observations on the nervous system, and I would still defer them, if I thought I were prepared with another subject as well suited to fix your attention. If I enter upon it unwillingly, it is not so much from the conduct of those who have opposed my particular views, as from the overpowering recollections of him from whom I have received the chief assistance, and who is in my mind associated with every step of this inquiry:—lost to my affections, and to the profession, a painful blank is presented in performing this task.

We enter upon a subject the most difficult of all anatomy. The nerves have been called the vital solids, as it is on them, in an especial manner, that the chief endowments of life are bestowed. Through them, we are prepared to comprehend the phenomena of a living body, and are enabled to observe and arrange the symptoms of disease: it is therefore by far the highest department of anatomy, and on that account well suited to the audience which I have now the honor of addressing.

The nerves themselves inform us of nothing: it is not yet determined if they be sources of power: but by observing their relations, and their course through

the different parts of the body, we arrive at the most curious and important conclusions.

When the nerves are minutely dissected, they present an extraordinary degree of intricacy, which may excuse some in saying that the study of them can lead to no useful result. The discovery of new branches of nerves, or of new ganglions, have tended only to involve the subject in deeper obscurity, and to repel inquiry in the last fifty years. Diligence finds its reward in the enthusiasm that springs out of it. There was a pupil in Windmill Street, a German physician, who dissected the nerves with extraordinary perseverance, so that when the body was lifted out of the spirits in which it was preserved, it presented a complete tissue, or network of nerves all over it. Different individuals form different anticipations of their employment in a future life. Painters have assigned us our places and occupation, surrounded with clouds and sun-beams: but this gentleman's notions of the pleasures of a future state were, that he might prosecute these nerves to still greater minuteness, and know their origins and terminations.

If you contemplate a body that has been thus preserved in spirits for three months, and dissected morning, noon, and night, the tissue of nerves which is displayed appears in inextricable confusion. It is difficult to conceive that there is design and system here: look even to this drawing, or to these preparations, and you see threads of nerves passing in all directions—some part of the body receiving one nerve, another two; some three, or even more: you see little ganglions seated in dif-

ferent parts, as if it were by chance; and nerves diverging from them or seeming to terminate in them, and the whole is in apparent confusion. But when you dissect a second body, and perhaps a third; and when your curiosity leads you to inquire whether a certain part is supplied with one, two, or three nerves in all the bodies, or whether the same little ganglion lodges in the same recess, and receives the same branches in the first and in the second and the third, and you discover that the nerves correspond exactly in every body,—that there is no such thing as a nerve deviating, or being wanting, unless through the hurry or awkwardness of dissection, you are constrained to believe that the confusion is in our heads, and that there must reign a symmetry and a systematic arrangement in the distribution of the nerves. Now the desire to find the clue to this labyrinth naturally arises. The origin and distribution of each nerve must surely explain its function and use: therefore the relations of the nerves must be like a language: and how happy should we be to find a key that made the characters of this language intelligible!

The history of this subject does not assist us much: one prevailing error has misled all who have entered upon it. From the time of Herophilus and Erasistratus, the ancient physicians had the notion that the brain presided over the animal system, by the mediation of the spinal marrow and the nerves which are produced from it, and distributed to the body. From the time of Galen, they knew that by cutting or tying a nerve, or in any way intercept-

ing the communication with the brain, the parts to which it belonged were immediately deprived of sense and motion. What Dr. Martin (in the Edinburgh Essays) calls "the prettiest instance," was their experiment of tying the arteries by the side of the windpipe, and immediately striking the animal dumb. Galen, who labored at this matter more than any of his predecessors, proved that it was not tying the vessels, but the recurrent nerves; which, by depriving the glottis of power, destroyed the voice.

The operators, in those days, appear to have had that boldness which characterises ignorance. A scrofulous boy, falling into the hands of an ignorant surgeon, had a tumor extirpated from the neck, and the recurrent nerve at the same time cut, by which he lost half the strength of his voice;—and it is added that he escaped better than another boy, who, in a similar operation, had both the recurrenents cut, and was left quite dumb.

However, such were the occurrences and experiments which confirmed the notion that all power emanated from the brain. The prevalence of the same opinions has been a natural consequence of looking on the subject exactly in the same aspect. Every treatise begins formally with the enumeration of the parts of the nervous system; as the brain, the spinal marrow, the nerves, &c. thinking that, by such an enumeration, an exactness and precision must attend their method; whereas, in fact, they have already entered on a wrong path, and have taken an improper guide.

On the other hand, a more extensive survey of animated nature

should have informed them, long before the present age, that there are innumerable animals which have neither brain nor nerves, and yet have life, and sensibility, and motion. By such a contemplation of the chain of beings, we learn that the matter which possesses the endowment, and which is capable of being excited, and consequently of reaction, exists independently of the brain and nerves; and that this matter of nerve is diffused in the animal body. It would not be a just method of investigating, to admit that the same phenomena were produced by different organizations. If sensibility and motion belong to the nerves—if the matter of the nerves be appropriated for receiving these endowments of life—we are not authorized, when the same phenomena are presented, to presume that these result from any other organization than that of nerves. Therefore, if we see, in the lower creatures, that they shrink from injury, it implies that they have nervous matter distributed in the body, although not in that form to be displayed by the knife of the anatomist. The matter of nerve is diffused, not bound up in cords.

If the investigation were prosecuted from this point, and by ascending in the scale of animals, it would soon be made apparent that nervous threads were introduced to connect parts already in possession of vital power; that organs are connected in sympathy through them, so as to constitute a circle of the economy; and muscles are associated by them, so as to combine in action.

But the subject has not been pursued in this manner. Galen, as we have said, described mi-

nutely the brain, the medulla spinalis, and the nerves proceeding from the brain. He taught that the will resides in the brain, as the origin of the nerves, and that the nerves are tubes carrying animal spirits from the brain to the moving parts of the body. A lucid spirit, he says, may be seen flowing through them; but some of the nerves are, in his opinion, not hollow, and the influence is propagated along these, by impulse. The anatomy and the opinions of Galen prevailed from the second to the sixteenth century, down to the time of Vesalius.—(The Professor, at this part, introduced a slight notice of Vesalius's life and pursuits, as forming an æra in the progress of anatomy.)—Though, on many points, Vesalius resisted the authority of Galen, he adopted both his anatomy and his opinions of the nervous system, with little variation. With him, the vital spirits were formed from the blood in the brain, were collected in the cavities, or ventricles, and there elaborated;—thence he traced them into the spinal marrow and the roots of the nerves, and so over the body. These doctrines came down, with no essential variation, till the time of Haller. Willis, indeed, gave us an arrangement of the system, adapted to the dissection of the body, and he entertained many ingenious conjectures on the uses of the parts of the brain; but still that organ was, with him, the sole *officina spirituum*, providing a subtle spirit which distilled through the nerves; and the nerves had no other distinction than as this spirit was liberally or sparingly supplied to them. However minutely he details the manner of the blood ascending into the brain,

and the processes of distillation and circulation of the spirits, it is, in all material circumstances, the hypothesis of the ancients.

It has been said that it is singular that the sagacity of the Greeks should have, so long ago, suggested the distinct functions of the nerves, and, in fact, have announced the different uses of the nerves, which I shall make, in the course of these Lectures, a matter of demonstration. But there is nothing distinctly stated further than what is proposed hypothetically to account for common phenomena; for it was known to them, as to you, that a limb was sometimes deprived of sensation and retained its motion, or enjoyed sensation and lost the power of motion. There will be found in Willis's works, as in the ancients, a great deal of discussion regarding the properties of the *spirit*—as for example, whether there was an animal or a vital spirit, or a sensorial and motor spirit; but all hypothetically, and neither proceeding on anatomy nor on experiment. Nor did they, in reality, make any distinction of nerves further than the speculations of Galen—whether the hard nerves were for motion, and the soft ones for sensation, or whether the nerves from the spinal marrow were best calculated for muscular nerves, and those from the brain for sensitive nerves.

All these questions will be found touched on by Haller, where, in the end, he concludes, "But I know not a nerve which has sensation without also producing motion. The nerve which gives feeling to the finger, is that which moves the muscles; and the fifth nerve of the brain branches to the

papillæ of the tongue, and also to the muscles."

(To be continued.)

IV.

THE following is an abstract, made for this Journal, of some of the papers on the Uterus, which have been lately received from abroad.

Several papers have recently appeared in the foreign journals on rupture, and other diseased states of the uterus. In the *Med. Gazette* for January 17th, Mr. Spark communicates a case of rupture from a fall. A distinct sensation was experienced at the moment of the accident, of some "tearing, and giving way on the inside." Pains came on four days after the fall. During the intervening three days there was uneasiness, restlessness, irritability, indescribable feeling of weight and pressure in the abdomen; no pain; slight sanguineous discharge from the vagina; patient able to walk about, and attend to her ordinary domestic duties. A circumstance worthy of remark in this case was the continuance of pains after rupture; their increase after examination, and exhibition of ergot.

"Slight uterine pains commenced on the 19th, (four days after the fall,) and continued with variable force (all last night they were very strong) till this morning (22d). I found her seated on the side of the bed, with her feet on the floor; she looked pale and exhausted, her respiration was hurried and difficult, voice tremulous, surface of the body cold, pulse 190. She has not felt the

child since the accident, and has had no uterine pain for several hours. The abdomen is tense, and so exquisitely sore as to preclude the slightest attempt at external examination by pressure. On examining per vaginam, I found the os uteri much dilated and flabby within an inch of the external aperture, but could discover no part of the fœtus with the finger passed as far as possible into the uterus, though I could distinctly feel its head through the upper and posterior parietes of the vagina, which were bulging forwards. On introducing my hand into the uterus, I found that the legs and thighs of the child, with the placenta and cord, were its only contents, the whole of the body having passed into the abdomen through a fissure in the right side of the uterus, the breech of the child occupying the aperture, but not so closely as to prevent my feeling the intestines with the point of the finger. The contractile power of the uterus being again excited by the manual irritation, aided perhaps by a dose of the *secale cornutum*, and the external parts in a very relaxed state, the delivery of a full-sized male child, in a state of putrefaction, was easily effected, by gently drawing down the feet; but the instant the child was extracted, the patient sunk into a most alarming state of collapse, from which she was difficultly roused by the application of pressure to the uterine region, hot flannels to all parts of the body, and the free administration of brandy with tinct. opii. The reaction, however, was of short continuance, for in five hours after delivery she died."

In the same number is another

paper, in which the writer states that he has known rupture to happen in six cases, all of which were fatal, and one only which recovered. In this, as well as in the above, the pains are stated to have continued after the rupture, and what is still more remarkable, the child was delivered without manual aid through the natural passages. A slight rupture of the perineum took place. This patient had a child, two years after, without any untoward occurrence.

In the *Lancet* for Dec. 6th, 1828, in the records of the meetings of the London Medical Society, a case of rupture of the womb is related by Mr. Lord. The woman was pregnant with her fifth child. The liquor amnii was discharged when Mr. L. saw the patient; the vagina dilated and well lubricated, but pains much abated. Three doses of ergot were given. Pains were somewhat increased. The scalp was felt to be tense and puffy; the *vecitis* was tried. The head was believed to be hydrocephalic, and perforation was attempted. The head receded, and the pains entirely ceasing, it was thought a rupture had taken place. Another physician was called in; he found that the child had escaped into the cavity of the abdomen, and proposed the operation of gastrotomy. This was done; the patient expressed herself greatly relieved, passed a good night, but died on the following afternoon. On examination after death, a rupture abundantly large for the escape of the fœtus was discovered. The head of the fœtus was immensely large.

The discussion upon this case occupied the Society three successive meetings. The questions more especially agitated were, the agency, if any, of the ergot in producing the rupture; and the practice which, under the circumstances preceding the rupture, ought to have been pursued. The following is from Dr. Hopkins, who performed the operation of gastrotomy; and whose opinions seem deserving of respect in this debate:

“Dr. Hopkins objected to the notion of the ergot, alone, producing the accident, though absent when this remedy was had recourse to. On examining the uterus after death, which, together with the *fœtus*, he has now in his possession, he found it *healthy, excepting near the laceration*, through which the child passed; but on that part, namely, the posterior surface, the organ appeared completely altered, and softened in its texture. Judging from the morbid appearance of this part, he could not reconcile his feelings to the idea that the *secale cornutum* had been the sole means of causing the mischief; but that the parturient efforts, *unaided*, would have been sufficient to produce the rupture. Indeed, he made a point of inquiring from the patient, and ascertained that she had felt a dull and continued pain in one particular part of the abdomen, the situation of that part of the uterus found subsequently lacerated; the pain had continued for three months without intermission. He conceived, therefore, from the *post-mortem* appearances, there could not be a question but that it originated from *chronic inflammation*.

The *fœtal* head, again, being partially decomposed, the integuments must have given way, before the accident could have occurred, had the entire uterus been in a healthy condition.”

The other question, of what ought to have been done, was variously answered. A considerable number, however, of the members thought that the head ought to have been opened. In reading the debate with tolerable attention only, it can hardly but occur to any one, that this opinion, if it had not its origin, got much support from the discoveries made as to the state of the *fœtal* head after its removal from the mother. It was then found to be immensely large, and was supposed, upon a moderate calculation, to contain a gallon of water. It is somewhat doubtful, from what Mr. Lord states he noticed on careful examination, *per vaginam*, if any practitioner would have been justified in perforating when the ergot was given.

The following is from the report of the third meeting on this case of Mr. L.

“He was desirous, at once, of coming to the question, as to what were the most advisable means to be pursued when such an untoward event had taken place? The practice which had been adopted by Dr. Hopkins, in the operation of gastrotomy, he considered to be the only proper measure. Three modes of treatment present themselves for consideration, as Burns justly observes, when the uterus is ruptured during gestation, and prior to delivery:—To leave the case to Nature, to deliver *per vias na-*

naturales, or to perform gastrotomy. With respect to the first measure, he would simply remark, that there was no well-authenticated case of recovery, where the foetus was allowed to remain in the cavity of the abdomen, the woman being at the full period of gestation. As regards the second means, delivery *per vias naturales*, he would only repeat the language of an eminent writer:—"To dilate the os uteri forcibly, and thus extract the child, is a proposition so rash and hazardous, that I know no one who would adopt it." The operation of gastrotomy, then, was the most preferable measure, and although the experience on the subject was but limited, yet, looking to the results of the few cases in which the operation had been performed, we are fully borne out in its adoption. Since the last meeting, he had referred to the authorities on this subject, and he found that the first case recorded, is in the 3d volume of the *Journal de Medicine* for 1768: the woman here survived. In the *Memoirs of the French Academy* was an account of a case, in which the operation was twice performed by Lambron, on the same female, yet she did well; and, lastly, in the 2d volume of the *Quarterly Journal of Foreign Medicine*, a successful case was related, on the authority of Bernard and Latouche. With respect to Dr. Ryan's observations on Dr. Hopkins having operated at a time when there was much depression of vital power, he (Mr. Lambert) would say, that the prostration is a leading characteristic throughout of the rupture of any viscus; that patients die in this condition, without any apparent effort at reaction; and, consequently, that

any delay in opening the abdomen, and removing an oppressive cause, in his opinion, would have been culpable."

In a French Journal, a case is reported of extra-uterine pregnancy, which was fatal in the fourth month. This was one of those rare cases first reported by Mauvideau, Schemit, and Albert, in which the foetus is developed in the substance of the womb itself, and hence termed interstitial extra-uterine pregnancy. The womb in this, as in other cases, in which the foetus does not reach its cavity, was found enlarged,—to have formed the *membrana decidua*,—and to have made in short all its usual preparation for the reception of the ovum.

A case is reported in one of the English Journals, in which a decoction of ergot, in the proportion of four scruples of the powder to four ounces of water, boiled down to two, was exhibited with great benefit in a case of abortion, at the sixth month, in which the cord broke off near the placenta. The placenta was retained five days, and much irritation being produced and no pains, the ergot was given, in doses of half an ounce of the above every half hour. The placenta, with a quantity of coagula, was expelled after the third dose, by most powerful contractions of the womb. The ergot used was twelve months old.

In another communication on the Ergot, a number of cases are related illustrative of the speedy effect of this substance in lingering labors. The writer says he has met with but one case of stillborn child in numerous instances where he has used the

ergot. His dose varies from a scruple to half a drachm. In most he gives a scruple.

A case is reported by F. Froggatt, surgeon, of violent flooding, in a patient six months gone with child, in which he tried ergot without producing the least action in the womb. Slight pains preceded the flooding. He first gave 3iss. in 3ij. water; after ten minutes, the same quantity. Then from another portion of ergot he gave 3i. and 1 scruple in 3iss. water, repeating every quarter of an hour till three doses were taken. 3ss. was next procured from another source, and in a quarter of an hour from last dose, half of this was given; and in ten minutes the other 3ij. No pain whatever was excited, but the hemorrhage was entirely checked, and she seemed, at time of report, to be in a fair way to go the full time. The only noticeable effect was strangury; and as no uterine action was produced by the above large quantities, Mr. F. occasionally gave a drachm of the powder, by way of experiment, and always found the same desire to void urine, and the same sort of strangury, as when full doses were given.

BOSTON, TUESDAY, MARCH 17, 1829.

Description of the Smallpox, Varioloid, Cowpox and Chickenpox, illustrated by thirteen Engravings.

By J. D. FISHER, M.D.

A QUARTO volume with this title has within a few days been published in this city, by Messrs. Wells & Lilly. It is truly a splendid specimen of printing. The paper is of the best quality, and the engravings admira-

bly well executed. The accuracy of the drawings, or paintings, from which these were taken, may be gathered from the following account of eleven of them, in Dr. Fisher's prospectus.

"The paintings, from which these eleven plates are to be engraved, and of which they are to be the exact copies, were made in Paris, in 1825-6, at the time when the diseases which they are to represent prevailed epidemically in that city. They were executed by a French artist for, and under the immediate direction and personal observation of the author of the proposed publication, and were all commenced and finished at the bed-side of the patients from whom they were taken."

It was the purpose of Dr. F. to have completed his work by twelve plates,—a thirteenth, however, has been added, without any addition to the price. The letter press amounts to nearly eighty pages, and instead of mere explanations of the plates, Dr. F. has added descriptions of the disease in every instance. In this he has exceeded his original plan, still without adding to the price of his work. The first five plates contain representations of the progressive development of the *Distinct*, the *Confluent*, and *Inoculated Smallpox*,—the next seven, of the *Distinct*, and *Confluent Varioloid* eruption,—that of the *Chickenpox*, and the perfect and imperfect *Cowpox*. The cases represented are not of the mildest or the severest forms of the diseases. Dr. F. has purposely made choice of cases of an intermediate character and moderate severity, from a belief that the delineations of such would be the best calculated

to convey to the unpractised observer the general character of the symptoms.

It will be perceived from examining the plates, that the *same identical* pustules are delineated in succession, so that the progress which they make from period to period, and the changes they undergo, are exhibited and may be studied. This representation of the progressive development of the eruptions, constitutes the great value of the work. For, although the inexperienced practitioner might not be able to recognise the eruption at its early stage, by comparing it with the representations in the plate, yet he cannot fail to distinguish its character in some part of its course, by studying the other parts in which the progressive development of the eruption is delineated.

In the text the author has given an explanation of the plates, and a particular description of the diseases which they are intended to illustrate, —and, lastly, in order to render the diagnosis as plain as possible, he has instituted a comparison between the symptoms and characters of the *Smallpox* and the *Varioloid disease*, —the *Smallpox* and the *Chickenpox*, —and the *Cowpox* and inoculated *Smallpox*. It is hardly necessary to add to the recommendations of a work which promises so much, and in which we cheerfully add, the author has so well accomplished his task, that it is *unique* in its kind. It may seem strange, but it is no less true, that this is the first work in which the smallpox and the varioloid have been represented in colored plates, and in which the comparison of them with diseases to which they

are more or less nearly allied, has been so faithfully made. It should be in the hands of every practitioner; and it would be a very useful work in every vessel destined to a foreign port, as well as to every town.

Method of arresting the Bleeding from Leech-bites.

It is well known that sometimes, especially in very young children and persons of scorbutic habit, all the means recommended to check the hæmorrhage from leech-bites, as cold water, flour, alum, caustics, and pressure, prove so entirely useless, that actual cautery and ligature must at last be resorted to. M. Ridolfo, of Leghorn, recommends a new method, which he has found as safe as it is simple. It consists in applying a cupping-glass to the wound, when a coagulum is almost immediately formed, and the bleeding arrested. This effect is very quickly produced, and has been found to take place even in children, and in persons where the mass of the blood appears to be in a state of dissolution, and without any tendency to coagulation. The instrument may safely be removed within a few minutes, but it is prudent to let the coagulum remain for some time.

WEEKLY REPORT OF DEATHS IN BOSTON,

Ending March 14, at noon.

March 7.	Sarah Gurney,	39 yrs.
	Mary Smith,	57
	Samuel Cass,	22
	Abigail Mangalls,	36
	Robert Turner,	2
8.	George Shaw,	4 w.
9.	John Boit,	56 yrs.
10.	Mary Sullivan,	14 mo.
11.	Mary Porter,	4 yrs.
	Elizabeth Leeds,	14
14.	Andrew Shea,	40
	Edward Perkins,	21

Bilious fever, 2—childbed, 1—hooping cough, 1—infantile, 1—lung fever, 1—ossification of the heart, 1—rheumatic, 1—typhous fever, 2—unknown, 2. Males, 6—females, 6. Stillborn, 3. Total, 15.

ADVERTISEMENTS.

DENTAL SURGERY.

THIS day received by Benjamin Perkins & Co., No. 135, Washington Street,—A SYSTEM OF DENTAL SURGERY. In three parts.

1. Dental Surgery as a Science.
2. Operative Dental Surgery.
3. Pharmacy connected with Dental Surgery.

By SAMUEL SHELDON FITCH, M.D., Surgeon Dentist. *Denticum curam habeto ut bene digeras et diu vivas; laxatis dentibus laxantur et chylaceo officinae; hinc mille malorum occasiones.*—Baglivi XIII. March 17.

ep6w

NEW MEDICAL WORK.

JUST published and for sale by Benjamin Perkins & Co.—THE FRENCH PRACTICE OF MEDICINE; being a translation of L. F. Begin's treatise on Therapeutics; with occasional notes and observations, illustrative of the treatment of diseases in the climate of North America. By XAVIER TESSIER.

ep3w

March 17.

CASEY'S APPARATUS FOR THE CURE OF DISTORTED SPINE.

THE Proprietor of the Dormant Balance for the cure of Distorted Spine, gives notice, that he has established an agency in this city, for the convenience of those who may wish to avail themselves of this invention. Physicians having under their care the subjects of this disease, or patients themselves, may have an opportunity of inspecting the apparatus, and examining the testimonials of its efficacy; at Mr. Charles White's, corner of Winter Street. It is recommended, however, that all patients availing themselves of this invention, should do it by the advice, and under the superintendence, of their own physicians, as it is only by medical opinion that the proper subjects of the machine can be determined, or the other proper measures to be made use of in conjunction with it, can be pointed out. The Proprietor expressly disclaims the idea that a cure is to be effected, in any case, by mechanical means alone. This machine has received

the approbation of many of the most eminent medical men in this city and New-York. Upon application to the agent, references will be given, and written testimonials exhibited.

All letters, post-paid, addressed to J. Lincoln, No. 27, Fayette Street, will be attended to.

Boston, Feb. 6, 1829.

EUROPEAN LEECHES.

RICHARD A. NEWELL, Druggist, 91, Summer Street, has on hand a small lot of EUROPEAN LEECHES, in excellent order, and of very large size, which he will sell at a fair price.

N. B. Leeches applied as usual, or sent to any part of the city. 4t.

SURGICAL INSTRUMENTS.

DAVID & JOHN HENSHAW & Co. No. 33, India Street, near the head of Central Wharf, have for sale a very extensive assortment of Surgical Instruments. Gentlemen wishing to purchase will find it to their advantage to call and examine them. Oct. 14.

NATHAN JARVIS,

Druggist and Apothecary,

HAS taken the Apothecaries' Hall, No. 183, Washington Street (lately kept by Messrs. Wm. B. & Henry White.) His stock of Drugs and Medicines is complete and genuine. Physicians and others are assured that their orders, prescriptions, &c. will meet with prompt and strict personal attention.

The old friends of this establishment are requested to continue their patronage.

MANUAL FOR THE USE OF THE STETHOSCOPE.

JUST published by Benjamin Perkins & Co.,—MANUAL FOR THE USE OF THE STETHOSCOPE, being a short Treatise on investigating Diseases of the Chest. From the French of M. Collin, with an Introduction and Plates. By a Fellow of the Mass. Med. Soc.

The Stethoscope may also be obtained as above in the most approved form.

ep3w

Jan. 20.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

Cases of Neuralgia, or painful Affections of Nerves.

By JOHN C. WARREN, M.D.

NEURALGIA OF THE TRUNK.

Painful Affection of the Side.

THIS complaint was called *Pleurodyne* by Cullen and Sauvages; *Pleuralgia* by Good. Considered as to the organs diseased, it is of two kinds,—painful affection of the muscles, and painful affection of the nerves of the side. The former only appear to have been contemplated by the writers above named. They considered all these complaints to reside in the muscles; and Cullen set them down under the genus *Rheumatism*; while Good more properly viewed them as forming a separate genus, which he called *Pleuralgia*, and divided into acute and chronic.

Painful affection of the nerves of the side is distinguished from that of the muscles, in its wanting the tenderness or sensibility on pressure, which is generally found in the former,—in not being attended by pain on motions of the ribs or of the arm,—and in its permanency or greater duration.

The complaint may arise spontaneously; or from an injury; or from distortion of the ribs.

1. *Painful Affection of the Side, arising without evident Cause.*

Mrs. R. has been married two years without children; aged about 30; has had good health. About six months after marriage, began to be affected with a pain in the left side, about the fifth rib; extending from the angle of the rib forwards, towards the sternum. The pain gradually increased till it became severe, especially at night, when it deprived her of sleep sometimes. It has now destroyed her appetite, which was generally good. She is free from fever and derangement of the digestive organs. The pain keeps her in an unhappy state; prevents her employing herself actively in any way, and has caused a considerable degree of emaciation.

She was advised to apply eight leeches to the part affected, every other day, for three weeks; then to keep the side irritated with the ointment of Tartrate of Antimony, for two months; in the mean while, to take two drachms of the Carbonate of Iron in a day, and once in three days a purgative pill.

Four months after this prescription, I saw her again. She was free from pain; had recovered her strength, flesh, and spirits; and was able to use the arm without producing pain.

heated imagination, but to those who, from actual observation and experience, are capable of judging on this point.

I. PHARMACY.—No one will accuse us of advocating the present system of indenture, which we believe to be double, if not triple, the duration it ought to be. But we maintain that no man can practise either physic or surgery (much less pharmacy) well, who does not possess some practical knowledge, not merely of the properties, chemical constituents, and doses of medicinal agents, but of the *manipulation and extemporaneous composition* of the same, whether these last be learnt behind the counter of the chemist, in the private surgery of the general practitioner, or in the pharmacy of the hospital or dispensary. Now it is utterly impossible that a court of examiners can ask any pharmaceutical questions that may not be answered from what is taught in lectures on *materia medica*, or what is printed in the Dispensatories—unless, indeed, they keep a shop on one side of the Hall, and compel the candidates to boil decoctions, filter tinctures, roll pills, and compound mixtures. The certificate or proof of “actual service,” in this department of the medical state, cannot, therefore, be dispensed with, unless we admit that pharmacy, learnt in books or lectures, is as good as that learnt by the actual practice of the same.

II. ANATOMY.—Of all the branches of medical or surgical science, anatomy is that which might be best ascertained by an examination. But we are convinced that, even here, the new or Utopian plan would break down. The whole of descriptive

anatomy—the whole science of pathology, may be more *peritly* learnt from books, or even grinders,* than by actual dissection. All *viva voce* questions, then, might be answered by means of the very worst species of study—*cramming*. But, says the reformer, we shall have skeletons, vascular and neurological subjects—dried muscular extremities on the table—and, by these, we shall find out the candidate's anatomical knowledge. Vain expectation! On all *these subjects*, the grinder can descant, and the student can get crammed. “Then (says the projector of the new scheme) we shall have *brains* (if such can be found) in every court of examiners, and each candidate shall demonstrate the various parts of the encephalon.” Who shall find subjects—who shall find time for this species of manual anatomy? The thing is impracticable—and, if practicable, it ought not to supersede the proofs of the *quo modo* in which the anatomical knowledge is obtained.

* The trade of a *grinder* is fortunately unknown in this country. It is crowded in Great Britain. His business is to find out the general tenor of the questions put to young gentlemen at medical examinations, and all such as are most likely to be put from the knowledge, character, tastes, habits, or peculiarities of each examiner. For a small fee, candidates are taken in charge a few weeks immediately preceding their examinations, and so thoroughly plied with these questions, and saturated with the proper replies, that it requires absolutely very little professional attainment to appear well before the august assembly. It is very evident that knowledge thus cursorily and speedily and easily acquired, must be very soon lost, and hence the force of this part of Dr. Johnson's argument. Although we have no grinders in this country, yet, if the same system which is proposed in England were adopted here, they would doubtless rise up among us in great profusion.—*Ed.*

III. SURGERY.—The plan under consideration would tend to abridge the study of surgical diseases, by the toilsome and expensive mode of actual observation in hospitals and dispensaries; while it would encourage the accumulation of technical descriptions from books and “GRINDERS,” in the former of which, the symptoms of surgical diseases, and the steps of surgical operations, are minutely laid down. This species of surgical erudition would make a better figure in the examination, than that which was acquired by ocular observation in hospitals, or by oral instructions from teachers. How much superior the latter is, we need not stop to prove.

IV. CLINICAL MEDICINE.—This, the most important of all the medical studies, cannot be conveyed by means of books, or even of *viva voce* lectures—nor can any species of examination ascertain the candidate’s proficiency in it—unless there was a ward of sick patients attached to the examination hall. The only security, then, for clinical study, is the written proof of hospital attendance, which proof the wild radical plan of reform would dispense with. This fact alone, which cannot be questioned, is sufficient to condemn the proposed test of medical and surgical qualifications—a test which, if fully acted on, would do all in its power to depress the regular teacher—patronize the grinder—and imbue the medical student with technical, instead of practical, knowledge!

We have noticed this chimerical proposal, not from an idea that it will ever be entertained by any faculty, between Terra del Fuego and Lapland, but to

show the medical student the grounds of discontent, by which he is excited into hostility against those who are, by law, entrusted with his examination. That there is ample field for beneficial reform in our systems of medical education, in this country, we have often shown; but the wild ravings of a few visionary reformers have driven the period for its investigation to an indefinite distance. This is already too plainly proved. No human power—no play on the human passions, could now aggregate a dozen of respectable reformers in the Freemasons’ Tavern—or draw half that number of petitions to Parliament from the united empire! Yet the same state of things now exists as in 1826. We are told, indeed, by the radical press, that peace and perfect unanimity obtain throughout all ranks of the profession; and that they only wait the return of Spring, to burst forth, in a storm of virtuous indignation, against their oppressors! This is a curious kind of tranquillity. The fact is, a few half-cracked agitators have made sensible men shrink from every kind of participation with them; and the agitators, being now left to themselves, they call it “PEACE!” “*Ubi solitudinem faciunt PACEM appellant.*” Under existing circumstances, there is not the remotest chance or hope of medical reform, except what may flow from the spontaneous concessions of the constituted authorities. Half a dozen medical Cobbetts have done more mischief than fifty medical Burdetts can repair! The corporate bodies now smile at their opponents, whose ranks are deserted, in consequence of leaders, with whom Falstaff’s

gang, with Bardolf at their head, would be ashamed to associate ! Yet we think it would be wise in these corporate bodies, to seize this favorable opportunity for introducing liberal and enlightened measures, corresponding with the more extended views of modern times. It would be infinitely more graceful, that such measures should flow spontaneously from the constituted authorities, than that they should be exacted by popular clamor. A time may come, when the respectable members of the profession may think fit to form a strong and united phalanx, in favor of medical REFORM, after the ridicule and degradation attached to the word, and even to the measure, by the interference of the present advocates, shall have subsided. The voice of the profession must then be heard ; and it must have a great moral force when divested of the "RIBALDRY" with which it is now associated.

II.

CONFESSIONS OF BURKE IN THE GAOL.

Edinburgh, Jan. 3d, 1829.

AN old pensioner, named Donald, lived in the house about Christmas, 1827 ; he was in bad health, and died a short time before his quarter's pension was due ; that he owed Hare 4*l.* ; and a day or two after the pensioner's death, Hare proposed that his body should be sold to the doctors, and that the declarant should get a share of the price. Declarant said it was impossible to do it, because the man would be coming in with the coffin immediately ; but after the body was put into the coffin, and the lid was nailed

down, Hare started the lid with a chisel, and he and declarant took out the corpse and concealed it in the bed, and put tanner's bark, from behind the house, into the coffin, and covered it with a sheet, and nailed down the lid of the coffin, and the coffin was then carried away for interment. That Hare did not appear to have been concerned in anything of the kind before, and seemed to be at a loss how to get the body disposed of, and he and Hare went in the evening to the yard of the college, and saw a person like a student there, and the declarant asked him if there were any of Dr. Monro's men about, because he did not know there was any way of disposing of a dead body, nor did Hare. The young man asked what they wanted with Dr. Monro, and the declarant told him that he had a subject to dispose of, and the young man referred him to Dr. Knox, No. 10, Surgeon's Square, and they went there, and saw young gentlemen, whom he knows to be Jones, Miller, and Ferguson, and told them that they had a subject to dispose of, but they did not ask how they had obtained it ; and they told the declarant and Hare to come back when it was dark, and that they themselves would find a porter to carry it. Declarant and Hare went home, and put the body into a sack, and carried it to Surgeon's Square, and not knowing how to dispose of it, laid it down at the door of the cellar, and went up to the room, where the three young men saw them, and told them to bring up the body to the room, which they did, and they took the body out of the sack, and laid it on the dissecting table ; that the shirt was on the body,

but the young men asked no questions as to that, and the declarant and Hare, at their desire, took off the shirt, and got 7*l.* 10*s.* Dr. Knox came in after the shirt was taken off, and looked at the body, and proposed that they should get 7*l.* 10*s.*, and authorized Jones to settle with them; and he asked no questions as to how the body had been obtained. Hare got 4*l.* 5*s.*, and the declarant got 3*l.* 5*s.* Jones, &c., said, they would be glad to see them again when they had any other body to dispose of.

Early last spring, 1828, a woman from Gilmerton came to Hare's house as a nightly lodger, Hare keeping seven beds for lodgers: that she was a stranger, and she and Hare became merry, and drank together, and next morning she was very ill in consequence of what she had ate, and she sent for more drink, and she and Hare drank together; and she became very sick and vomited, and that time she had not risen from the bed, and Hare then said that they would try and smother her, in order to dispose of her body to the doctors. That she was lying on her back in the bed, and quite insensible from drink, and Hare clapped his hand on her mouth and nose, and the declarant laid himself across her body, in order to prevent her making any disturbance, and she never stirred, and they took her out of bed and undressed her, and put her into a chest.

The next was a man named Joseph, a miller, and lying badly in the house. That he got some drink from declarant and Hare, but was not tipsy; he was very ill, lying in bed, and could not speak sometimes, and there was a report on that account that

there was fever in the house, which made Hare and his wife uneasy, in case it should keep away lodgers, and they (declarant and Hare) agreed that they should suffocate him for the same purpose, and the declarant got a small pillow and laid it across Joseph's mouth, and Hare lay across the body to keep down the arms and legs, and he was disposed of in the same manner.

In May, 1828, as he thinks, an old woman came to the house as a lodger, and she was the worse for drink, and she got more drink of her own accord, and she became very drunk, and declarant suffocated her; and Hare was not in the house at the time; and she was disposed of in the same manner.

Soon after an Englishman lodged there for some nights, and he was ill of the jaundice; that he was in bed very unwell, and Hare and declarant got above and held him down, and, by holding him down, suffocated him, and disposed of him in the same manner.

Shortly afterwards, an old woman named Haldane (but he knows nothing farther of her) lodged in the house, and she had got some drink at the time, and got more to intoxicate her, and he and Hare suffocated her, and disposed of her in the same manner.

Soon afterwards, a cinder-woman came to the house as a lodger, as he believes, and she got drink from Hare and the declarant, and became tipsy, and she was half asleep, and he and Hare suffocated her, and disposed of her in the same manner.

About midsummer, 1828, a woman, with her son or grandson, about twelve years of age, and who seemed to be weak in his

mind, came to the house as lodgers ; the woman got a dram, and when in bed asleep, he and Hare suffocated her ; and the boy was sitting at the fire in the kitchen, and he and Hare took hold of him, and carried him into the room, and suffocated him.

That soon afterwards the declarant brought a woman to the house as a lodger, and after some days she got drunk, and was disposed of in the same manner. That declarant and Hare generally tried if lodgers would drink, and if they would drink they were disposed of in that manner.

The declarant then went for a few days to the house of Helen M'Dougal's father, and when he returned, he learned from Hare that he had disposed of a woman in the declarant's absence, in the same manner, in his own house ; but the declarant does not know the woman's name, or any further particulars of the case, or whether any other person was present, or knew of it.

That about this time he went to live in Broggan's house, and a woman named Margaret Haldane, daughter of the woman Haldane before mentioned, and whose sister is married to Clark, a tin-smith in the High Street, came into the house, but the declarant does not remember for what purpose ; and she was disposed of in the same manner. That Hare was not present, and neither Broggan nor his son knew the least thing about that, or any other case of the same kind.

That in April, 1828, he fell in with the girl Paterson and her companion, in Constantine Burke's house, and they had breakfast together, and he sent for Hare, and he and Hare disposed of her

in the same manner ; and Mr. Ferguson and a tall lad, who seemed to have known the woman by sight, asked where they had got the body ; and the declarant said he had purchased it from an old woman at the back of the Canongate. The body was disposed of five or six hours after the girl was killed.

One day in September or October, 1828, a washer-woman had been washing in the house for some time, and he and Hare suffocated her, and disposed of her in the same manner.

Soon afterwards a woman, named M'Dougal, who was a distant relation of Helen M'Dougal's first husband, came to Broggan's house to see M'Dougal ; and after she had been coming and going to the house for a few days, she got drunk, and was served in the same way by the declarant and Hare.

That " Daft Jamie" was then disposed of in the manner mentioned in the indictment, except that Hare was concerned in it. That Hare was lying alongside of Jamie in the bed, and Hare suddenly turned on him, and put his hand on his mouth and nose ; and Jamie, who had got drunk, but was not drunk, made a terrible resistance, and he and Hare fell from the bed together, Hare still keeping hold of Jamie's mouth and nose ; and as they lay on the floor together, declarant lay across Jamie, to prevent him from resisting, and they held him in that state till he was dead, and he was disposed of in the same manner ; and Hare took a brass snuff-box and a spoon from Jamie's pocket, and kept the box to himself, and never gave it to the declarant, but he gave him the spoon.

And the last was the old woman Docherty, for whose murder he has been convicted. That she was not put to death in the manner deponed to by Hare on the trial. That during the scuffle between him and Hare, in the course of which he was nearly strangled by Hare, Docherty had crept among the straw, and after the scuffle was over, they had some drink, and after that they both went forward to where the woman was lying sleeping, and Hare went forward first, and seized her by the mouth and nose, as on former occasions; and at the same time the declarant lay across her, and she had no opportunity of making any noise; and before she was dead, one or other of them, he does not recollect which, took hold of her by the throat. That while he and Hare were struggling, which was a real scuffle, M^cDougal opened the door of the apartment, and went into the inner passage and knocked at the door, and called out police and murder, but soon came back; and at the same time Hare's wife called out, never to mind, because the declarant and Hare would not hurt one another. That whenever he and Hare rose and went towards the straw where Docherty was lying, M^cDougal and Hare's wife, who, he thinks, were lying in bed at the time, or, perhaps, were at the fire, immediately rose and left the house, but did not make any noise, so far as he heard, and he was surprised at their going out that time, because he did not see how they could have any suspicions of what they (the declarant and Hare) intended doing. That he cannot say whether he and Hare would have killed Docherty or not, if the women

had remained, because they were so determined to kill the woman, the drink being in their head.

III.

RE-VACCINATION IN FRANCE.

It will be recollected that the habit of re-vaccination was recommended by Dr. Robbins in an early number of our Journal. As it was recommended in the hope that if such a practice were general it might prove a preventive of the varioloid, and with a view to draw the attention of medical gentlemen to the suggestion, we think it an object to record every well authenticated case which appears to throw light on so important a subject. To such cases, whether they count in favor of, or against the practice, our pages will be open.

The following case, with the introductory remarks by the Editors of the *Révue Médicale*, was translated from the French, and communicated for this Journal, by Dr. WARREN, of Plymouth, who we shall be happy to number among the frequent contributors to our work.

From the *Revue Médicale* for August, 1828.

Reflections on Re-vaccination.—

THAT cases of smallpox after vaccination do occasionally occur, is a fact now well ascertained. The causes of these attacks, notwithstanding the animated discussions to which the subject has given rise, are not easily determined, and it would therefore seem more useful to ascertain whether such accidents can be prevented by a re-vaccination. Dr. Boffinet has instituted inquiries on this point, which will be read with interest. Without absolutely rejecting any of the opi-

nions hitherto advanced, he regards them all as very doubtful. Has the vaccine virus lost any of its efficacy? Does it, in some subjects, not entirely destroy the susceptibility of again contracting the vaccine, and consequently, the smallpox? Or is its prophylactic power limited to a certain period? These are important questions, which diversified experience will alone enable us satisfactorily to answer. We proceed to cite the facts stated by M. Boffinot.

"My wife, aged 28, was vaccinated in 1801, twenty-seven years since. Four cicatrices, now remaining on the upper part of both arms, and which, in the opinion of competent judges, are such as result from the vaccine vesicle, sufficiently prove the regular progress of the disease. She was among the first in this country who enjoyed the benefit of this preventive, and everything conduced to an attentive observation of the progress of a discovery which promised such advantages, and was then the subject of so much contradiction. This strict observation, I have learnt, left no doubt as to the nature of the vesicles in her case. May 6, 1828, after having vaccinated a number of children, I made, with a lancet, two insertions of the vaccine matter on the anterior part of her left forearm. In selecting this place, I did not calculate on the success of the experiment. The child from which I took the virus, and to which I had communicated it a week previous, was nine months old, robust, healthy, and presenting on each arm two fine vesicles, hollowed in the centre, encircled with a bright red areola, and full of a perfectly transpa-

rent liquid, which flowed in drops at the punctures made to collect it. I was certain that the progress of the vesicle in this child had been regular, the eruption commencing about the end of the third day.

"May 10.—The two punctures made in the forearm, which had hitherto scarcely excited any attention, now presented a small red pimple, and a slight hardness was distinctly perceptible to the touch.

"11.—This pimple had increased, become circular, and depressed in the centre,—the red circle enlarged,—slight itching.

"12 and 13.—The areola more distinct and brighter; the lenticular vesicle become more elevated, and central depression greater.

"14.—A red point in the centre of the vesicle, surrounded by a whitish, limpid fluid; the areola somewhat enlarged.

"15.—The vesicles are well filled, the areola more extended, and the subjacent cellular tissue inflamed; the fluid still clear.

"Having, from the progress of the disease, not the least doubt of its nature, I this day showed it to several persons, and particularly to three physicians, who have long practised vaccination in this city. They all recognized at once the development of the vaccine vesicle. The crusts became greyish, fell off on the 30th day, and left two indented (*faveolées*) cicatrices, in every respect similar to those on the upper part of the arm.

"Wishing to give additional force to this conclusive experiment, I vaccinated three children the same day, May 15, with virus taken from my wife.

"1. The result in the first, aged

15 months, from four insertions, was very satisfactory. The vaccine went through its stages regularly, as I ascertained by personal observation.

"2. In the two others, one of 3 months, the other of 3 years, I made two punctures in the left arm with the same virus. Two other punctures were made on the right arm of each, with vaccine from another source. All the four vesicles were developed with equal regularity, and furnished the genuine matter.

"3. On the same day, I placed the same virus on plates of glass, and on the 19th, vaccinated with it two children, one of 8 months, the other of 2. In both, the disease showed itself in its usual form.

"4. The same day, I again re-vaccinated my wife,—two days after, however, there was no trace of the puncture.

"What are we to conclude from these facts?—that my wife was destined to have smallpox twice, or that the four vesicles developed in 1801 had not sufficiently neutralized the virus of smallpox,—or rather, that this was one of those rare cases, in which, according to Hufeland, the vaccine does not completely destroy the susceptibility of contracting smallpox? Whatever theory we may adopt, the experiment is not less valuable, by proving the possibility of the success of a repeated vaccination. Nor can there be a doubt that this second operation, when it succeeds, is of advantage,—to what extent, time and numerous experiments can alone determine.

"No objection, either as respects the disease itself or the person vaccinated, is opposed to

the repetition of this experiment. The pain of a slight puncture and of the eruption of a few vesicles is trifling, compared with the advantages of this new operation,—advantages, which, although still problematical, ought certainly to excite the attention of those who would properly appreciate the benefits of so valuable a discovery as that of vaccination.

"Everything, therefore, invites to a repetition of vaccination in the same individual, even more than once. I am of opinion, also, that it would be proper to subject to it persons who bear the marks of mild smallpox. Encouraged by the success I have obtained, and regardless of the ridicule which has been thrown on these attempts, I propose to extend and vary these experiments, for it is only by the aid of long experience and extended observation that we can arrive at the limits of possible attainment."

CLINICAL REPORTS.

MASSACHUSETTS GENERAL HOSPITAL.

Wound of Hand—Inflammation and Abscess of Vein—Abscesses in Liver.

THIS is a case remarkable for the fatal termination of a slight injury; probably from its being neglected in the first stage. The patient's constitution must have been in a bad state, though in appearance he exhibited no marks of such state.

March 17.—E. C., of M., about two months since cut the index finger of the left hand, near the first joint, though the wound was trifling at the time, and required no particular attention. In a few days the wound inflamed very much and became painful. Various emollient

applications were made, but were not sufficient to arrest the disease. Ulceration took place, and the bones of the second and third phalanges were denuded some distance from the joint.

He at this time had the finger amputated at the second joint. The wound did perfectly well the first week, after which time an abscess formed between the second and third joints, and immediately over the tendons of the digital flexors. The flap at this time had united over the end of the stump. In a day or two after this, two or more abscesses formed in the palm of the hand and over the metacarpal of the fore finger. These abscesses were laid open, and endeavors made to have them fill up by granulation, but to no purpose. They were attended with considerable pain and swelling, as consequents of an inflammation, which extended over most of the hand and up the arm. The abscess over the first phalanx of the finger extended to the bone. Cataplasms were ordered to the hand, and evaporating lotions to the arm.

General health has always been good, and is now so. Patient is a large, stout, and muscular man.

19.—Patient had his hand placed firmly upon a table, the palm looking upwards; a deep incision was then made, beginning about over the junction of the carpal and metacarpal bones, and carried downward through the abscesses to the end of the stump. The end of the bone belonging to the stump was naked, and removed by sawing, just below the third joint. Wound was dressed with lint and simple cerate; bleeding at the time of operation small.

20.—Hand not very painful last night; slept considerable; bandages are stiff from bleeding since operation, and *uncommonly fatid.* Ordered to be removed, and clean ones to be substituted. Appetite tolerable; bowels costive. May have cathartic.

21.—Hand bled very copiously last night, in consequence of keeping it too warm, to prevent taking cold. Hemorrhage was easily arrested by admitting cold air to wound. This morning, feels very well; has good appetite. May have house diet.

24.—Wound looks well, and filling up with healthy granulations; is washed twice a day, and dressed with lint and resinous ointment.

26.—Yesterday had a severe chill, followed by copious perspiration; countenance materially changed within a few days; now morbid; appetite wanting; pulse full; complains of burning and distress in epigastrium; pain in right shoulder. Ordered repeated doses of the solution of antimony, till vomiting be produced, and an alterative pill at night.

27.—Antimony did not produce much vomiting yesterday, but passed off by the bowels; in the evening had a recurrence of the chills, and rigors. This morning, tongue dry, and covered with a thick dark coat; pulse 120; strength somewhat diminished; appetite wanting.

28.—Yesterday, at the time a chill was apprehended, an attempt was made to vomit the patient, but it was not successful. Had a chill; suffered great distress about the epigastric region; took compound calomel pill at night; had no quiet sleep; tongue now as yesterday; teeth covered with sordes; lips dry; countenance sunken; conjunctiva of eye very yellow.

29.—Much yesterday as day before. Symptoms unfavorable; bowels costive. May have the compound infusion of senna, 3 iv., immediately.

30.—Cathartic did not operate. Repeat it to-day, and if no evacuation by evening, give enema.

31.—No operation from medicine, and enemata proved ineffectual. To-day give croton oil, calomel, and aloes. May have cider, or wine and water for drink.

April 1.—Had four dejections,

copious, dark, foetid; not attended with much debility; have afforded some relief to uneasiness felt at epigastrium. May have tonics to-day, unless contraindicated.

2.—Evacuations were frequent yesterday, and last night in other respects as before.

6.—Has been no important change during the few last days. Patient has gradually lost strength; has been inclined to a relax from the bowels; has taken wine, cider, brandy and water, barks, &c. Chills have recurred almost daily, attended with some delirium.

9.—On the 7th and 8th was much as before. To-day, is very low; comatose; aroused with great difficulty; pulse scarcely perceptible at the wrist; eyes half closed; breath short and quick; wound continued to heal rapidly, even after the system was much diseased and much reduced.

10.—Examination of the body by Dr. Warren, fifteen hours after death. *Thorax* presented nothing unnatural, except an old adhesion of the pleuras on the right side. Nothing found unnatural in the heart, except a slight induration of the veins of the semilunar valves.

Abdomen.—Here the liver was found somewhat enlarged, particularly the right lobe. Aspect of the organ changed; color various; in parts unnaturally light; near convex surface of right lobe was found an abscess, an inch or more in diameter, filled with a greenish pus. The organ now raised from its natural situation, on its under and concave surface was found another abscess, nearly as large as the first; a third was found in centre of right lobe, all similar in character; whole organ had lost its natural tenacity, and could be torn in any direction with a very slight degree of force. Gall bladder and its ducts natural.

Stomach found natural. Omentum unusually loaded with fat; in all respects healthy. This organ being turned upwards, the pancreas was

carefully noticed; found enlarged, by one quarter of its natural size; the whole gland much indurated, and lighter colored than usual.

Diseased hand and arm.—The wound on the hand had nearly healed; what remained unhealed a few days before the death of the patient, assumed a bad character, appearing gangrenous. Separate from the wound, there were no marks of disease in the hand or forearm. The cellular substance about the brachial nerve was found unnaturally dense, and adherent to the vessel; the coats of the vessel thickened, and containing purulent matter; between this point and the axillary vein, less marks of disease. In axilla, distinct marks of disease; coats of vein thickened; hard; cellular membrane surrounding it much changed; in the vessel was found pus and blood, amounting to half an ounce; beyond this point, no traces of disease could be discovered; glands not enlarged, nor changed from the proper appearance.

BOSTON, TUESDAY, APRIL 28, 1829.

PARAPLEGIA EPIDEMIÖ.

IN this age of novel epidemics, our readers will feel no surprise at the combination of words which appears at the head of this article. General paralysis has been of so frequent occurrence in Paris, for the last one or two years, that M. Bally, the Physician to La Pitié, considers it as exhibiting a kind of epidemic character. The distinguishing symptoms of the disease have been "a sense of numbness and tingling in the hands and feet, accompanied by a morbid sensibility in the surface, and an almost total loss of voluntary motion." This disease is attributed by M. Bally to some peculiarity in the atmosphere.

In some instances it has proved fatal, though the generality of those attacked have recovered. The mode of treatment appears to have been regulated by general principles. The single remedy which has proved most decidedly efficacious is Strychnine. This has been exhibited in doses of one-eighth of a grain *per diem*, gradually increased, in some cases, to three grains, and assisted by moxas to the spine.

Our Parisian friends are also favored by a visit from the Dengue, of which disease some notice has already appeared in this Journal. It seems to assume there a decidedly intermittent character, and has been considered by eminent men in the profession as of the neuralgic order, and a malarious origin.

Among ourselves, though exempted from any epidemic, there appears a degree of *periodical* tendency in the complaints of the season. In affections of the chest, attended by cough, the cough has appeared, during the past winter, to come on in severer paroxysms than usual, and to leave the patient more free from a sense of irritation in the intervals. As far as our own observation has gone, this has been very general; and after the recovery has so far advanced as to render professional attendance unnecessary, these paroxysms have continued, abating gradually in length and violence, till subdued at last by the curative power of nature. Antispasmodics have proved, in our hands, wholly insufficient to arrest this morbid *habit*. So, also, with painful affections of the head. Intermittent headaches have been frequent,

and have generally yielded to large doses of quinine or of bark, after active emetics, purgatives, leeches, and the lancet, had been tried to no purpose. We should like to be informed if the diseases throughout the country have partaken more than usual of an intermittent or periodical character, and whether the preparations of bark have been called for more than usual in their treatment.

CLIMATE OF BARBADOES FOR CONSUMPTIVE PERSONS.

INDIVIDUALS who have visited Italy, Madeira, and Barbadoes, for the purpose of recovery from incipient Phthisis, have given the decided preference to the latter resort. The climate of Barbadoes is particularly serene and delightful during the months of December, January, February, March, and April,—the period when consumptive persons in our latitude feel most the want of a mild and balmy atmosphere. The surface of the tropical island is more level than that of Madeira, and the facilities for exercise consequently greater. Dr. Johnson recommends this winter residence for “patients affected with tubercles in the lungs, not yet advanced to the softened state,—and to those who have had hæmoptysis, but who have not actually purulent expectoration.” Before and after the period above mentioned, the climate of this island is not such as to render it a desirable resort for valetudinarians,—hurricanes and heavy rains preceding, and excessive heat coming on after it.

POISONING BY CHEESE.

ALTHOUGH cases of poison from cheese are not uncommon, yet, as far as we have been able to learn, no chemical analysis has yet detected the substance to which such injury is to be attributed. It is hence concluded that the pernicious quality of the cheese must depend on some article eaten by the cow, which, in the process of lactification, has undergone such changes as to elude the tests of the chemist, without destroying its power of deranging the functions of system when received into the stomach.

The only objection which has appeared to invalidate this explanation is, that "we never meet with similar effects produced by drinking milk." This objection is sure to be brought up by the by-standers, when, in attending on a case such as we have alluded to, the physician offers the above explanation to quiet the inquiries of the curious, which come to him with so much earnestness from every direction;—the profession will thank us, therefore, for furnishing a wrinkle so exceedingly desirable on such occasions. Several cases of poisoning by *milk* are related in the French *Journal Général de Médecine*. The milk which proved so deleterious to all who drank it, was of a goat, and it is supposed to have been affected by some sour broth which she had taken,—the broth having been left to sour in a copper vessel.

PRESSURE IN ASCITES.

DR. SPERDUZA, an Italian physician, has successfully applied the principle

of pressure to a case of watery effusion into the cavity of the abdomen. The patient was a female, who had labored under the disease some months. It was originally caused by peritoneal inflammation succeeding accouchement. At the time the pressure was applied, the distention was very great, emaciation general, and the appearance of the patient cachectic. The strength was greatly reduced by a slow fever and protracted nursing; the digestive functions deranged; the urine scanty and turbid; thirst urgent; bowels constipated; and the usual course of diuretics, mercurials, &c., had been resorted to without benefit.

Pressure was applied to the abdomen by means of Monro's bandage; and under its influence, the quantity of urine increased, until at length it amounted to fifteen pints daily. At the expiration of the third week, the abdominal tumor had entirely subsided, and the cure was completed by sulphate of iron, squills, and a generous diet.

This is certainly a remarkably fortunate case. Could we point to twenty such, the practice might be recommended with confidence. As it is, the trial ought, perhaps, to be made in obstinate cases, though we can hardly suppress our fears that the cure of this lady must have been owing to some other influence than that of the bandage.

BLISTERS IN MEASLES.

SEVERAL cases have been related in recent foreign journals, in which the symptoms of measles were rendered lighter by the early use of blisters.

It is said this practice very considerably diminishes that pulmonary irritation, which, in itself and its consequences, is usually the greatest evil attendant on the disease. We can add nothing from personal experience, never having resorted to vesication *before the appearance of the eruption*. The authorities on which it is recommended are entitled to confidence, and we therefore present it to the view of the profession.

CHIRAYITA BARK.

This bark appears to be at present quite fashionable in England. It is supposed to be particularly suited to cases of indigestion; as a stomachic and tonic medicine, it is *said to be* superior to the Cinchona. We have not as yet sufficient practical evidence of this superiority to recommend the article in very distinct or strong terms. It is here noticed with a view only of referring to a case of Leucorrhœa, attended with indigestion, in which the extract of the Chirayita was successfully used by Dr. Blundell. He prescribed a drachm of the extract, with five grains of powdered cinnamon, to be taken several times a day.

TENIA.

THE essential oil of wormwood seeds has been used with success in cases of tenia. A case is related in one of the European Journals, in which 10 drops of this oil, in conjunction with 10 grains of calomel, brought away a tape worm, ten feet in length.

Vapor of Iodine for the Cure of Consumption.—A letter from Dr. Berton was lately read before the

Royal Society of Medicine, respecting the employment of the above-named medicinal agent in cases of tubercular consumption. This mode of using iodine appears to the author to have a double advantage—first, in not producing gastric irritation; and being also immediately applied to the diseased part, he produces the vapor by the application of sulphuric acid to the hydriodate of potash. Air loaded with this vapor does not excite the least irritation in the throat. M. Berton cites three cases in which this method was productive of good effects: in two of them the cough and expectoration were diminished, and the appetite improved; in the third, although the plan had not been long adopted, the relief was evident. M. Berton thinks that a greater number of facts are still required to enable us to pronounce an opinion as to the real value of this medicine.

Journal Hebdomadaire.

Inflammation of the Veins of the Uterus after Parturition.—M. Dance, in a memoir just published on Uterine Phlebitis, has related from his own observation, and from the works of Andral and Louis, eleven cases of fatal inflammation of the veins of the uterus, with the appearances which were witnessed on dissection. This most dangerous form of uterine inflammation was observed to commence most frequently a few days after delivery, with rigors, general uneasiness, suppression of the lochia, and pain and sense of weight in the hypogastrium. The size and sensibility of the uterus gradually increased, the expression of the countenance became greatly altered, and prostration of strength, with delirium, and other symptoms of typhoid fever, rapidly succeeded, and destroyed the patients. This disease was observed in several cases to be complicated with extensive disorganization in remote organs of the body. In three cases severe pulmonary symptoms occurred, and on dissection purulent

deposits were found in the substance of the lungs, with pleuritis and effusion into the sac of the pleura.

In another case an inflammatory swelling suddenly formed around one of the joints. The veins of the uterus were in most of these cases found inflamed, and in a state of suppuration, and the substance of the uterus had become preternaturally soft, and of a dark color. In two, the peritoneal surface of the uterus was covered with lymph.—*Archives Générales de Médecine, December, 1828.*

Unusual Length of the Umbilical Chord.—In the obstetrical observations of Dr. Schneider, of Fulda, a case is related, in which, during a very tedious labor, the contractions of the uterus having been almost instantaneously excited by a large dose of secale cornutum, a male child was born, apparently asphyxiated by the pressure of the umbilical chord, which was twisted six times round its neck; but having been immediately extricated, the child was restored to life; the umbilical chord was five feet five inches in length.

In another case related by the same author, the umbilical chord went twice round the neck, and once round the trunk, from whence it passed between the thighs to the placenta. Besides this unusual length, it exhibited a *real knot*, which, as appeared from the gelatinous substance of the chord, had existed a long time before birth.

Siebold. Journ. fur Geburtsch.

Fever of Gibraltar.—A letter from M. Louis was lately read at the sitting of the Royal Academy of Medicine in Paris. From this it appears that in his opinion the fever is really the true yellow fever of the Antilles. Ten subjects had been opened by the Commission; in none of them could the slightest trace of organic lesion be discovered; thus

making a most marked difference between this disease and the fatal cases of fever usually met with in France. The epidemic, after having been stationary for a time, or rather, perhaps, diminished, resumed its activity; a dozen or fifteen cases were daily admitted into the hospital, of whom from five to eight died: some perished very quickly, that is, on the third or fourth day of the disease. After this the frequency of the disease gradually diminished, till it entirely subsided.

NOTICES.

BOOKSELLERS, PUBLISHERS and AUTHORS, are informed, that by transmitting to the Editor, free of expense, a copy of such works as they may write or publish on subjects interesting to the medical profession, they will be entitled to a notice of such works in the pages of the Journal.

Dr. GILBERT's case of amputation is acknowledged, and will appear next week.

Dr. WARREN's remarks on his cases of Neuralgia will also appear in the next number.

Dr. JONES, of Georgia, having had the civility to forward us a copy of his Essay versus Malaria, it will receive early attention.

DIED.—In this city, April 13th, Hon. David Townsend, M.D. æt. 76.

In Salem, on the 31st of March, Edward Augustus Holyoke, M.D. L.L.D., æt. 100.

WEEKLY REPORT OF DEATHS IN BOSTON,

Ending April 17, at noon.

Of abscess, 1—apoplexy, 1—brain fever, 1—consumption, 6—convulsions, 1—inflammation in the bowels, 1—old age, 2—pleurisy, 1—worms, 1—unknown, 4. Males, 10—females, 9. Stillborn, 2. Total, 21.

ADVERTISEMENTS.

DENTAL SURGERY.

THIS day received by Benjamin Perkins & Co., No. 135, Washington Street,—A SYSTEM OF DENTAL SURGERY. In three parts.

1. Dental Surgery as a Science.
2. Operative Dental Surgery.
3. Pharmacy connected with Dental Surgery.

By SAMUEL SHELDON FITCH, M.D., Surgeon Dentist. *Denticum curam habeto ut bene digeras et diu vivas; laxatis dentibus laxantur et chylaceo officinæ; hinc mille malorum occasiones.*—Baglivi XIII.

March 17.

ep6w

LONDON STATIONARY, &c.

JUST received by COTTONS & BARNARD, 184 Washington Street, Crown and Double Crown Tissue Paper, large thin Bath Letter Paper; Billet Paper, Demy and Royal Bristol Board, do. do. London Board, Newman's Carmine, Music Paper.

A COPY of Bloomfield's Critical Digest of Sacred Annotation on the Gospels, 3.vols. 8vo. "The most learned Commentary in the English language." For sale by COTTONS & BARNARD, 184 Washington Street.

CASEY'S APPARATUS FOR THE CURE OF DISTORTED SPINE.

THE Proprietor of the Dormant Balance for the cure of Distorted Spine, gives notice, that he has established an agency in this city, for the convenience of those who may wish to avail themselves of this invention. Physicians having under their care the subjects of this disease, or patients themselves, may have an opportunity of inspecting the apparatus, and examining the testimonials of its efficacy, at Mr. Charles White's, corner of Winter Street. It is recommended, however, that all patients availing themselves of this invention, should do it by the advice, and under the superintendence, of their own physicians, as it is only by medical opinion that the proper subjects of the machine can be deter-

mined, or the other proper measures to be made use of in conjunction with it, can be pointed out. The Proprietor expressly disclaims the idea that a cure is to be effected, in any case, by mechanical means alone. This machine has received the approbation of many of the most eminent medical men in this city and New-York. Upon application to the agent, references will be given, and written testimonials exhibited.

All letters, post-paid, addressed to J. Lincoln, No. 27, Fayette Street, will be attended to.

Boston, Feb. 6, 1829.

NEW BOOKS FOR CHILDREN.

JUST published by COTTONS & BARNARD, 184 Washington Street.

The Waning Moon, by the author of the Rising Sun; The White Palfrey, by the author of Thomas Mansfield; The Kind and Happy Child, by the author of the White Palfrey, &c.

FRENCH WATER COLORS.

COTTONS & BARNARD, 184 Washington Street, have for sale, the following Water Colors, of an excellent quality, manufactured by P. C. Lamberlye, (France,) viz: Bistre, Raw Cassel, Burnt Umber, Raw Umber, Egyptian Brown, Vandyke Brown, Brown Pink, Seppia, Violet Lake, Carmine Lake, Sanders Blue, Prussian Blue, Mineral Blue, Indigo, Yellow Ochre, Yellow Mineral, Gamboge, Yellow Orpiment, Yellow Lake, Naples Yellow, Burnt Italian Earth, Burnt Sienna, Raw Sienna, Italian Earth, Crocus Martial, Green Lake, Sanders Green, Sap Green, Mineral Green, Prussian Green, Vermillion, Saturnine Red, Indian Red, Red Ochre, Red Orpiment, Flake White.

Also—a great variety of Newman's, Ackerman's, Reeves's and Osborne's Colors, in boxes and separate cakes.

SUNDAY SCHOOL CONVERSATIONS.

COTTONS & BARNARD, 184 Washington Street, have just published, Sunday School Conversations, on some of the interesting subjects recorded in the New Testament. By the author of the Factory Girl, The Badge, James Talbot, &c.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

THE BOSTON
MEDICAL AND SURGICAL JOURNAL.

Vol. II.]

TUESDAY, MAY 26, 1829.

[No. 15.]

I.

To the Editor of the Boston Medical and Surgical Journal.

Windham, May 4, 1829.

SIR,—I send you the following curious case. If you should be of opinion that it would subserve the medical profession, by exciting useful inquiries, or in any other way, you are at liberty to publish it.

Yours, &c.,

JAMES W. PERKINS.

Mrs. —, a middle-aged woman, of good constitution, had been the mother of five healthy children, in uninterrupted succession, and had invariably had short, easy labors. In 1822, she again became pregnant with her sixth child, and went her full time. During the first months of pregnancy, she was as well as usual; but for more than two months before delivery, was almost constantly afflicted with pain in the right side and back, and became so enfeebled as to be unable to sit up for several days before the commencement of labor. Breech and feet presented; pains feeble. Feet and legs brought down into the vagina, and she was delivered principally by manual extraction. The child presented a complete mass of deformity, and had no life. A minute description of this monster might be given, were it necessary to my present

purpose,—suffice it to say, that the membranes of the brain and abdomen were fully distended with water, and its features deformed throughout. Placenta and funis very tender. The mother was relieved of pain, and remained comfortable for twenty-four hours; was then attacked with severe pain in the right iliac region, increased by pressure, which was soon removed by an active cathartic and vesication of the region. From this time the patient went on well, and had a good getting up. In 1823, this woman again became pregnant, and had no untoward symptoms until the sixth month, when she began to complain of pain in her right side, and an uncommon sense of fulness. These symptoms continued to increase, especially the sense of fulness, up to the time of delivery, at the commencement of the eighth month. May 2d, 1824.—Labor-pains came on. Examination per vaginam: os uteri beginning to dilate; pelvis almost completely filled with the uterus, distended with water. Pains continued, and at 2 o'clock that morning, the membranes ruptured, and I was sent for. Having only a few rods to travel, was soon there, and found the woman in bed, almost deluged with water. There was at least two gallons, still remaining upon the sheet in a body,

so little, as to produce very slight inconvenience. A perforation of the membrane is indicated when air or smoke can be drawn from the mouth through the external ear.

Other communications, wholly of an experimental nature, free from hypothesis, and drawn up with commendable simplicity, were made to the same learned body ; in consequence of which, on the 18th of February, 1802, Mr. Cooper was unanimously elected a member of the Royal Society.

In the same year, he imparted to the editors of the London Medical and Physical Journal, some interesting and important cases, accompanied with a descriptive plate, exemplifying an improved treatment of popliteal aneurism. The celebrated surgeon, John Hunter, first contrived a plan of securing the arteries ; but his method sometimes failed in practice, on which account that skilful operator, Mr. Abernethy, directed his attention to the subject, and suggested the application of two ligatures instead of one, and afterwards dividing the vessel, thereby lessening the danger of hemorrhage. Great as this improvement was, some danger still attended it, particularly from the effusion of blood. Mr. Cooper, therefore, contrived a more facile method of fastening the wounded artery, by an eyed probe with a double ligature, which happily answered the purpose, and that in some very desperate cases.

In 1804, Mr. Cooper published, in one volume, folio, and dedicated to Mr. Cline, a work entitled "The Anatomy and Surgical Treatment of Inguinal and Congenital Hernia, illustrated by Plates."—Though the world in general is not quite aware of the extreme frequency of hernia, every medical

practitioner knows that the disease is one of common occurrence in every rank of life. But notwithstanding the obligation under which the faculty lie, of studying this complaint in all its varieties; there was still wanting a clear and accurate treatise, exhibiting all that minute anatomy has been able to discover, and skilful surgery to practice, in the knowledge and treatment of hernia. This deficiency was now in a great degree supplied by our author, who in his preface says, "I have almost uniformly avoided quoting the opinions of authors on this part of surgery. This I have done, certainly not from any wish to slight or undervalue the labors of some of the most excellent physiologists and practitioners that have adorned our profession, but because it did not form a part of my plan to give a history of this branch of surgery, and because I wanted to confine myself to the very wide scene of observation afforded by the two noble institutions of St. Thomas's and Guy's Hospitals, and to that portion of the practice of this metropolis which I have been personally enabled to authenticate. I have therefore related no cure, and given no remark, to the truth of which I cannot vouch ; and for the same reason, the subjects of all the plates annexed to this volume, are from preparations either in my own possession, or in the Anatomical Museum at St. Thomas's Hospital."

The style of this performance, as also that of all the author's productions, is a simple communication of facts, clear and unaffected. Almost everything relating to the history of opinions and discoveries in the disease is omitted : the author has appeared desirous of incurring a personal responsibility

for the accuracy of every case and assertion ; and to confine himself to the results of a multitude of dissections, of which actual demonstration exists in one or two cabinets of anatomy, or to the records of numerous operations, of which living witnesses remained at the time when he published the respective cures to the world. Under a plan thus circumscribed, to have made so valuable an accession to the kindred arts of anatomy and surgery, displays a brilliant testimony of extensive knowledge, professional skill, unsparing industry, and scrupulous integrity in the author.

In 1807, our indefatigable observer completed his design by publishing, in the same splendid form, a treatise on "Crural and Umbilical Hernia." These two works have been since concentrated in one volume, with additional cases, and edited by the author's pupil and coadjutor, Mr. Key, of Guy's Hospital.

In 1805, Mr. Cooper coöperated with some of the most eminent London practitioners, in founding a social institution for reciprocal information and public improvement. The first fruits of this "Medical and Chirurgical Society" appeared in 1809, when a volume of its Transactions was published. In their preface, the editors give a modest account of the plan on which the institution was founded:—"The varied forms of disease, whether medical or surgical, and the modes of treatment which may be found adequate to their removal, are subjects concerning which the Society necessarily feels the highest interest. Cases having a fatal issue are often not less instructive than such as terminate favorably. They frequently tend

to point out more accurately the plan to be pursued in the treatment of similar complaints ; they afford valuable information relative to the probable causes of failure, and, when dissection is permitted, they throw light on the more intimate nature and modification of the disease."

This volume contains "two cases of Aneurism of the Carotid Artery," by Mr. Cooper ; the first of which terminated fatally, and the second fortunately. The subsequent volumes of the transactions were also enriched with valuable papers from the same source. Other publications, devoted to the extension of science and professional improvement, have also been enriched with valuable communications from this indefatigable practitioner ; and among the rest may be mentioned "The Edinburgh Medical and Surgical Journal," to which he voluntarily transmitted, at the very commencement of the work, some curious cases.

In 1811, Mr. Cooper favored the profession and the public with a series of experiments instituted by him, in order to ascertain the resources with which nature is provided for distributing the vital fluid throughout the bodies of animals, when the principal trunks of arteries are destroyed. To determine this point, Mr. C. tied the *aorta descendens* of dogs, very near to the heart, in such a way as to stop the current of blood from passing by that vessel, to all the lower parts of the frame. The animals seemed to sustain no great inconvenience by this treatment ; the wounds soon healed, the health was not impaired, the secretions proceeded as usual, and the creatures even remained active and lively. When they were destroy-

ed, after some weeks or months, in order to ascertain what changes had happened from the destruction of a part presumed to be so essential to life as the aorta, it was found obliterated where the ligature was fixed, and that the blood had been transmitted by anastomosing branches.

On the resignation of Mr. Cline, there could be no hesitation in regard to the choice of a successor; and Mr. Cooper, from this period, may be considered as standing unrivalled in the double situation of surgical operator and anatomical preceptor.

To the acquisition of wealth, distinctions of the most flattering description were soon added. He was nominated surgeon to his Majesty; and in 1821, he had the satisfaction of relieving the august personage from a very uneasy excrescence which had formed on the top of his head. The operation was painful, but the King bore it without evincing any emotion; and when complimented by Mr. Cooper for his fortitude, he replied, "None of our family was ever known to want courage." For his skilful performance of this service, the dignity of a baronet was conferred upon the surgeon, the 27th of July, in the same year, with remainder, in default of male issue, to his nephew, Astley Paston Cooper, Esq., the third son of the late Rev. Samuel Lovic Cooper, A. M., rector of Ingoldsthorpe and Barton, in the county of Norfolk.

On the 11th of August, 1828, Sir Astley was gazetted as sergent-surgeon to the King, which may be said to complete his professional honors. His fame, however, rests upon a more stable foundation than such adventitious

distinctions: and as long as the two noble establishments to which he is attached shall adorn the metropolis, the name of Cooper will be venerated, by the public, no less than by the faculty, to whose history it gives so brilliant a lustre.

It remains only to observe, that though past the meridian of life, the powers of this celebrated practitioner continue to be employed for the general benefit of mankind, and the particular instruction of surgical students.

Mr. Bransby Cooper, the brother of Sir Astley, and member of parliament for Gloucester, has distinguished himself by his zeal in defence of the Protestant establishment, and opposition to what is called Catholic Emancipation.

II.

Case of the Leaping Ague of Angus-shire.

By JOHN CRICHTON, Esq., Surgeon, Dundee.

TOWARDS the commencement of January, 1818, I was requested to visit Miss M. C., æt. 15, a girl naturally of a brisk and lively temperament, and of quick sensibility. From her parents I learned the following particulars of her previous history. During the summer of 1815 she had suffered much from stomach complaints, rejecting almost everything taken into the stomach, excepting brisk small beer. In the month of October, 1816, the rest of the family being from home, she, with two of her sisters, slept in the house by themselves. One evening, towards midnight, she thought she heard the sound of footsteps, and awakened her sisters, who said

she only dreamed, and desiring her to be quiet, fell immediately asleep again: Not feeling satisfied, however, she got out of bed, and found there were in reality people in the house. The lobby window was open, through which the thieves had gained admittance. In a state of desperation, she sprung out at the window and knocked up the people in the adjoining house. During the interval, however, the thieves had made their escape, leaving their booty bundled up behind them; but the effect of the shock upon her delicate frame was not easily to be effaced, and the subsequent illness and death of a favorite sister the following season, did not tend to improve her condition. She became pensive and bewildered, was affected with excessive perspirations, and her strength rapidly declined. At one period during the summer, the catamenia made a slight appearance, but never returned. Towards the close of the year 1817, she had frequent attacks of shaking, accompanied with foaming at the mouth, and followed by a state of coma, which, after continuing about an hour, gradually went off. At the commencement of the year 1818, when my attention was directed to her case, the disease had assumed the following appearances:

Every morning, about ten o'clock, she became drowsy and torpid; about eleven she began to arouse out of that state; by twelve she got out of bed, and went through the house collecting her trinkets, such as watches, rings, writing apparatus, and other articles she had secreted the preceding day in holes and other by-places out of sight. These she brought with her into bed,

and amused herself with them for some time, occasionally conversing with those in the room, but in such a language that no stranger, and hardly even those of the family, who were constantly beside her, could understand. This arose from her commencing the sentences with the last word, and very frequently pronouncing the words themselves with the last letter foremost. At times, when by no possibility she could make herself understood by her parents or sisters, she became irritated, and would write down what she wished to convey; but her manner of writing was equally singular, beginning at the right edge of the paper and writing backwards towards the left, the last word of the sentences first, and often the last letter of the word first, and this she performed with great rapidity, and seemingly without consideration. Her sight likewise was peculiarly affected, seeing objects only in particular directions, so that when she wished to view anything, she was necessitated to turn her head in another direction. About one o'clock she again got out of bed, and, after carefully secreting her trinkets in various by-places of the house, she commenced dancing the *Copenhagen jig*. Her excitations continued to increase; she jumped upon the tables and chairs, sometimes running with great rapidity round and round the edge of a table, then springing up and squatting herself upon the top of the room door, swinging backwards and forwards without any hold. At this time she required to be very narrowly watched, for fear of her springing out of the window, which she often manifested an earnest longing to do. On one

occasion, the outer door happening to be open, she made a sudden spring out, clearing the staircase at one bound. She was instantly followed and brought back, without having sustained any injury. At first they were in the habit of attempting to keep her forcibly down in bed, fearing she might injure herself. But the strength of several people together was insufficient for that purpose, as she got out of their hold like an eel, springing to the other end of the room, so that it was thought most advisable to allow her to take her own way, only guarding the windows and door. About two o'clock, becoming quite exhausted, she got into bed, and, falling into a deep sleep, she awakened about five o'clock in her right mind, and without being in the smallest degree conscious of anything that had taken place during the paroxysm. She continued so until about ten o'clock next morning, when the same, or nearly the same, routine took place.

After attending particularly to the state of her bowels, various medicines were used, with little or no effect. Opium, however, administered an hour before the accession of the paroxysm, once or twice prevented its recurrence, but was followed by so much stupor and confusion of intellect, that it was not persevered in. The shower-bath was afterwards had recourse to, which put a stop to the train of symptoms; but this again was followed by a complete locking of the jaws for eight days, during which period nothing could be introduced into the stomach excepting by suction between the teeth. The disease, however, never afterwards ap-

peared in its exquisite form, and gradually subsided. She was taken to the country towards the beginning of March, in a state of convalescence, and a sea voyage to the Baltic, during the summer, completely restored her to health and strength.—*Med. Chir. Rev.*

III.

Case in which the Operation of Lithotritie was successfully performed, by ROBERT LISTON, Esq., one of the Surgeons of the Royal Infirmary of Edinburgh, Lecturer on Surgery, &c. Communicated by Mr. ANNANDALE, House-Surgeon.

ANDREW LEECHMAN, aged 70, was admitted into the Royal Infirmary on the 10th of November, 1828. He stated, that for five months past he had been laboring under all the symptoms of stone in the bladder. On sounding him, a stone was distinctly felt. As he had a great aversion to being cut, and as his urine seemed to indicate a diseased state of the bladder, it was thought advisable to break down the stone, in preference to the usual operation.

On the 13th of November, a solution of opium having been injected into the bladder, Mr. Liston introduced Civiale's instrument, but owing to the restlessness of the patient, and the irritable state of the bladder, did not succeed in grasping it completely. Several small portions of stone, however, came away in the fangs of the instrument, and during the night. He suffered no inconvenience from the operation. On the 15th, he passed a barley-corn incrustated with calcareous matter. On the 16th, a piece of straw with the same incrustation. He

complained of pain in the testicles. On the 18th, a small abscess having formed in the scrotum was opened.

The instrument was again introduced on the 25th. The stone was fairly laid hold of, but was so soft that it was crushed by the instrument, on withdrawing which, several fragments of seeds were found adhering. He now confessed, that while reaping during the last harvest, he had introduced a number of barley-corns into his urethra, but would not say for what purpose.

The patient had repeated attacks of retention of urine after the last operation, from the larger portions of stone lodging in the urethra. He passed in all thirteen fragments, having entire barley-corns for their nuclei, besides a much greater number having only small pieces of the beards. He had now little pain, and the quantity of mucus in his urine was considerable. He was soundnd several times, and as nothing was felt in his bladder, he was dismissed, cured, on the 16th of December, 1828.—*Ib.*

IV.

Imaginary Affections—Pretended Operation—Recovery.

THE two following cases have occurred, one in 1820 and the other within the last few months, under the care of M. Maury, at the Hospital of St. Louis.

CASE I.—A young man from the country, a laborer, imagined that he had swallowed a young snake in a glass of water. "It is five years (said he) since the accident occurred; since which time the animal has not ceased to grow. It has now attained an

enormous size, and produces great inconvenience: constantly in motion, it traverses the belly, mounts into the chest, and sometimes rises up to the left eye, when I have a distinct perception of its size and color. Sometimes its movements are so violent and painful, that I am obliged to constrain them by seizing and squeezing it through the parietes of the abdomen." The patient described a variety of other circumstances connected with his internal enemy, and appealed to the by-standers whether they did not hear it hissing; yet, in all other respects, he was perfectly rational. M. Maury, aware that no reasoning would avail, affected to agree with him. The patient himself expressed his conviction that nothing but an operation could save him. It was practised. In order to render the illusion more complete, a large plait was made in the integuments of the abdomen, the base of which was traversed with a bistoury, and a live adder introduced into the wound in the form of a seton. One of the wounds being covered with the hand, the patient was requested to assist the operator by seizing the head of the "serpent," and unite his efforts in extracting it. No idea can be formed of the joy of the patient without having witnessed it. Next day he declared that he was prodigiously shrunk, in consequence of the extraction of the horrid creature; all the torments which he had suffered for five years were removed; the cure was complete in a few days, and what is more remarkable, it has continued permanent. One circumstance alone for a moment rendered it doubtful,—the patient was afraid that

the serpent might have left some eggs; but his confidence was completely restored on being assured that it was a *male*.

CASE II.—The subject of this observation was a woman, aged 40, the mother of several children, of a nervous temperament, and her health broken by various causes, principally moral. She was admitted into the Hospital St. Louis last November, after having gone the round of most of the hospitals in Paris, and consulted a great number of practitioners, on account of an animal which moved about in the hypochondriac region and left flank, producing pain, extending sometimes to the corresponding side of the head. On some occasions she described it as a tape-worm, on others as a worm covered with bristles; sometimes as an adder, and sometimes leeches, which she had swallowed in eating water-cresses. The countenance was expressive of mental suffering and excitement, but the intellect was

not deranged, except as regarded her complaint. She had increased appetite and borborygmi, which she attributed to the movements of the animal; she was constipated, averse to exercise, and fond of solitude. These circumstances, it will be perceived, rendered this case more complicated than the preceding. It was evident that, though there might be some real suffering, there was more which was imaginary. M. Mau-ry, however, easily persuaded her that the animal was a serpent, and that an operation alone could remove it: accordingly, an operation similar to that above described was had recourse to. The success, however, was not quite so complete, as she still complained, either owing to her experiencing real pain, or that her imagination had not been entirely satisfied. However, she left the hospital much more tranquil, and it has since been ascertained from her family that she has nearly recovered her health.

La Clinique.

SKETCHES OF PERIODICAL LITERATURE.

DELIRIUM TREMENS.

THE proper treatment of this disease, and the circumstances which distinguish it from inflammation of the brain, appear to have attracted, of late, considerable attention. It seems to have been ascertained by experience, that where this disease is regarded as inflammatory, and venesection resorted to, this measure is always followed by an aggravation of the symptoms; and it has repeatedly happened that a fatal termination has ensued within a few hours.

The following considerations, perhaps, will, if kept steadily in view, assist in forming this important diagnosis:—1. Phrenitis is always accompanied with severe pain in the head and intolerance of light; both of which symptoms are absent in delirium tremens.—2. That tremulous motion of the limbs, which gives its name to the latter disease, the convulsive effort with which the hand is extended, and other motions, performed as circumstances may require, are entirely peculiar to it, and

where they have been once noticed are not easily forgotten.—8. The species of mania in the two cases is essentially different; since, in delirium tremens, the patient can generally recognize his friends and the physician, and, provided his attention be commanded, will converse rationally on any topic; circumstances which seldom or never characterize phrenitis.—4. The total absence of sleep may be regarded as peculiar to delirium tremens, in which, whenever slumber occurs, it may be regarded as in the strongest sense critical; whereas, in phrenitis, intervals of sleep are not unusual, and a certain degree of stupor marks the whole progress of the disease.—Such are the main indications by which these two important maladies may be distinguished, and by which the practitioner is to be guided in their treatment.

There are, indeed, occasionally, cases of delirium tremens preceded by decisive symptoms of cerebral congestion, for which local or general bloodletting may be found useful; but such cases are of rare occurrence, and their treatment requires great caution on the part of the practitioner, for, if the depletion be carried farther than is demanded by the local plethora, the consequence will certainly be a general prostration, which will render the subsequent malady more severe and more dangerous.

METALLIC LIGATURES.

THE last American Journal contains an account of some very interesting experiments by Dr. Levert, of Alabama, on different kinds of ligatures

applied to the arteries. Many years ago it was suggested by Dr. Jones, that if a small ligature were tied so tight round an artery, as to divide its inner and middle coats, adhesion would take place, and the ligature might be removed before dressing the wound. This was found not to be so safe and efficacious as Dr. J. supposed, and the evil was remedied in practice by allowing the ligature to remain some days, only observing, in dressing the wound, to leave one extremity out. It is needless to detail the accidents which have resulted from this common and almost necessary procedure.

Some years ago, Dr. Physick proposed the use of animal substances for ligatures, supposing that they might then be safely left around the artery, and that they would be taken care of by the absorbents. This practice has never been very extensively adopted, and seems, indeed, less likely to be so than the subsequent proposal of Dr. P., that leaden cords should be used for securing arteries. That observing and distinguished practitioner was led to this proposal by the fact, that shot, bullets, &c., will remain years embedded in the flesh, without producing any considerable pain or inconvenience.

The experiments of Dr. Levert, twenty-one in number, were made on dogs, to try the effect of *metallic* substances used for tying arteries. Lead, silver, gold, and platinum, were all used, and uniformly with the same result. The wound healed over them; no symptoms of irritation ensued; and in about a week the

part was examined : the arteries were found impervious ; the ligatures quietly resting in their places ; and no mark of surrounding irritation was discoverable. Dr. L. then made use of a stran of silk, waxed, in several cases ; but these ligatures were found surrounded with pus.

APPEARANCE OF THE BLOOD AN UNCERTAIN GUIDE FOR THE PROPRIETY OF REPEATED VENESECTION.

FROM some observations recently made by Dr. Davy, it seems that the appearance of the blood drawn in inflammation, affords much more limited means for judging as to the propriety of repeating the operation, than has generally been supposed. In many instances of severe inflammation, both of the common cellular substance and of the serous and mucous membranes, the blood, when drawn, was examined by him, and found neither buffed nor cupped, and in fact to possess none of those qualities which are usually supposed to accompany this state. Any in-

ference, therefore, which may be derived from this circumstance in regard to subsequent practice, must necessarily be extremely uncertain ; and although it may be highly proper and necessary for the practitioner to examine the blood in all cases in which venesection has been performed, yet he will do wisely to trust in part only to the appearances which it presents, and to form his judgment principally from the comparative state of the patient himself, before and after the operation. We are disposed to think that the opinions of physicians on this subject at the present day, accord, for the most part, with these views of Dr. D. Few, probably, would withhold a second bleeding in pleurisy, where the pulse seemed to demand it, merely because the blood had not presented the requisite appearance ; and as few would continue to urge it in cases where relief had already been obtained, with no better reason than the presence of these morbid phænomena, if such they may be called.

BOSTON, TUESDAY, JUNE 9, 1829.

SELF-SUPPORTING DISPENSARIES.

INSTITUTIONS for affording medical advice and medicine to the poor, exist, in greater or less numbers, in almost every large town or city in the civilized world. No species of charity is less liable to abuse, than such as offers to the indigent that which necessity alone compels them to use, and which cannot be exchanged for cash or credit. Superabundance of food or apparel may be

bartered away for ardent spirits ; fuel may be sold for money to purchase it ; and articles of furniture, which the pleadings of penury may have drawn from the benevolent, may be, and all these *are frequently* exchanged for the means of indulging vicious propensities ; but a prescribed medicine will never be bought but by the individual for whom it was directed, and medical advice is good for nothing to the nearest neighbor

of the invalid. Whilst, therefore, societies for supplying the various wants of the healthy poor, have too often proved the means of diminishing their inducements to industry and sobriety, no possible evil ever has or can come of such as extend the hand of charity only where that of industry is paralyzed.

Institutions of such acknowledged excellence must be permanent, and their number and extent progressively increasing. It becomes an object, therefore, of no small importance, to ascertain the wisest and most economical mode of conducting them. The plans on which they are conducted differ greatly in different cities. In some, the whole expense is paid by subscription; in others, the extent of the charity is limited by the revenue of moderate funds; and in others again, as in our own city, the first of these means comes in aid of the last. In some places, any respectable physician is allowed to order medicine on account of the institution; in others, a few are specially elected to attend the dispensary poor;—these few are, in some cities, young men, to whom a personal attendance on the practice is an object; and in others, older practitioners, who act chiefly through their students. These physicians are paid for their attendance out of the funds of some dispensaries, whilst the directors of others consider the manifest advantages of the practice, and the honor of the station, as sufficient compensation; in some places a building is supported at considerable expense, containing rooms for receiving patients, prescribing for

them, and dispensing medicines; whilst in others, the sick are visited at their own houses, and the prescriptions made up by a general retailing apothecary. Of these latter, some pay the apothecary according to the cost of the medicine prescribed, and others allow a dollar or less per annum for each patient, the apothecary taking his chance to be a gainer or loser on the whole. These and other differences exist in different establishments.

It is remote from our design, as beyond our limits, to examine the pros and cons in each case, and give reasons for believing any one plan superior to all others. Every one will assent, however, to the proposition, that economy is an object of importance in the conduct of dispensaries; and in this country we shall receive as ready and universal an assent to the opinion, that it is a great desideratum that aid should be extended to the sick poor in such manner, as to weaken as little as possible that spirit of independence and pride of self-support, which distinguish the American poor from the same class in other countries. The first object is, and the last ought to be, held constantly in view, in arranging the internal concerns of all charities. This sentiment keeps many a hard laborer from the haunts of vice, and the no less destructive indulgence of a disposition to idleness;—it excites among the neighboring poor sympathy for each other, and leads to an interchange among them of acts of kindness, which keep alive some of the highest and best feelings of the heart. It is this sen-

timent which makes it necessary for the benevolent to seek out the distressed, and offer, as an unsolicited gift, that which, in other countries, is asked for with unblushing effrontery, or extorted by importunity or imposition;—it is this, in fine, which does more than civil legislation to prevent our streets from being thronged, and our dwellings beset by miserable objects of penury and distortion.

We have dwelt on this topic because it is apt to be overlooked, and because the plan we have to bring before the public appears to us an admirable one, inasmuch as it coincides with the view we have thus briefly presented. The plan to which we allude, was suggested by Mr. Smith, of Southam, Eng. Its peculiarity is the proposal, that *those whose families receive attendance from the Dispensary, shall themselves become subscribers at a very moderate rate.*

The question arises on the feasibility of this plan for what Mr. Smith calls "self-supporting Dispensaries." That all the expenses of even the most economical institution could be paid in this way, we very much doubt; but if such a feature were engrafted on our present plans, and the sums thus collected considered accessory to those otherwise obtained, little doubt can exist of its perfect feasibility. The first or lowest grade of poor are sent, when sick, to Alms-houses; it is the second and third grades who are dependent on Dispensaries in periods of ill health; and there are few among these who would not be able to pay half a dol-

lar a year, for the right of receiving medicine and medical attendance for themselves and families in case of sickness.

In this city, the number of patients who received gratuitous attendance and medicines at the Dispensary the last year, was 1600, more or less, and the expense to the Institution was about as many dollars. If we suppose that these patients belonged, on an average, two to the same family, about 800 families have received aid from the Institution. It is probable not more than half the families who habitually depend on this charity, have occasion to ask its aid in any single year, particularly one of such remarkable health as the last. If this be true, about 1600 families look to our Dispensary for relief in case of sickness. If now these families should become subscribers to the institution at half a dollar a year, the income from this source would be about 800 dollars, one half the whole expenses. If one quarter part of the expenses could be actually collected from the poor themselves, the proposed plan would be well worth a trial. At Atherstone, where it has already been tried, it has succeeded perfectly. No less than 765 patients have been admitted, and money enough collected to defray all expenses and leave a surplus of 80 pounds sterling, to be divided among the medical officers.

In our own city, independently of the absolute saving of expense to the Institution, (which we regret to learn is deficient in means,) it might enable the Managers to pay their Physicians, among whom any surplus

funds should always, from policy as well as in justice, be distributed. It is true that without the temptation of pecuniary reward, the medical offices are sought with avidity by the most talented and best educated young men in the profession; but this is in truth a strong reason why they should be paid for their services, if the Institution can afford it. That a young man has ability and zeal in his pursuits, has been industrious, and has spent two or three thousand dollars more than his neighbor in getting the best professional education, is but a poor reason why he should work for nothing; these things give him rather a higher claim for compensation. But, putting the interests of the Physicians and of the Institution entirely out of the question, the *principle* is admirable, and the moral advantage of such a plan to the poor themselves, entitles it to our serious consideration. It is enough that it would tend to cherish that feeling of self-dependence which we have before alluded to as one of the noblest sentiments of our nature, and which outright charity must tend in a measure to subdue.

THE NEW MEDICINES.

VIII.—*Quinine*.—Quinine is the effective principle in Cinchona bark. It is white and uncrystallizable, and its salts are pearl-colored. The preparation most used in medicine is the *Sulphate*, which has all the properties of Cinchona, and may be used on all occasions where that remedy would be proper. Its advantages over the bark in substance are, the greater uniformity in its strength, and the

consequent advantage of regulating the dose with accuracy; the small volume and the more agreeable form in which it may be administered; and its better adaptation to a debilitated state of the stomach.

An overdose of this medicine produces great nervous agitation, with strong cerebral excitement. The *Syrup* is supposed by Magendie to exert some power over the scrofulous affections of children.—The price of Sulphate of Quinine is \$5 the ounce,—of the Tincture, 37 1-2 cts. the ounce.

Modes of prescribing Quinine.

1. *Sulphate of Quinine in pills.*
Dose, from 4 to 14 grains.
2. *Syrup of Quinine.*
Take of
Simple Syrup, 2 pounds,
Sulphate of Quinine, 64 grains.
Mix.
- 3.* *Wine of Quinine.*
Take of
Good Madeira wine, 1 quart,
Sulphate of Quinine, 12 grains.
Mix.
4. *Tincture of Quinine.*
Take of
Sulphate of Quinine, 6 grains,
Alcohol, at 34 deg., 1 ounce.
Mix.

LIFE OF DR. GOOD.

SINCE giving a biographical sketch of this distinguished individual, which was drawn after reading the London edition of Dr. Gregory's Memoirs, we have seen a reprint of this work by Messrs. CROCKER & BREWSTER, of this city. It forms a very handsome duodecimo, and differs from the original in the omission of the preface and several extracts from the

* The wine of quinine may be extemporaneously prepared, by adding two ounces of the tincture to a pint of wine.

writings of Dr. Good and others,—parts not important to the biography, and interesting to the English antiquary only. By these omissions, the book is offered in a form and at a price well suited to the wants of the American reader.

The first Section contains the memoirs of Dr. Good's life,—a life both eventful and useful, and replete with interesting and instructive lessons. The second Section consists of a review of the writings of Dr. G., and a general sketch of his intellectual character. The third presents us with his religious history, and is followed by the sermon occasioned by his death;—the whole constituting a work which will be esteemed a great accession to the medical literature of the age, and a valuable possession not only to the physician, but to the Christian scholar.—The Boston edition contains a lithographic portrait of Dr. Good, which is an exact copy of the original.

Amputation at the Hip-joint.—This operation was performed about two months ago at Edinburgh by Mr. Liston. *The operation was successful, but the patient died.* It is but justice to Mr. L. however to add, that the operation is reported to have been performed with great dexterity and skill, and that the parts were found diseased higher up than was anticipated.

Malpraxis in Midwifery.—A somewhat remarkable and novel question has recently agitated the medical faculty in France. Dr. Helie, of Chenu, in the department de l'Orne, was called to a lady in labor, and found, on examination, that both arms presented. After twenty-four hours of pain, mostly ineffectual, he

conceived the life of the mother to be in danger. For the last ten hours the child exhibited no evidence of life, and the arms, closely embraced by the os uteri, were swollen, livid, and in a state approaching to gangrene. Under these circumstances, he thought the only expedient for saving the life of the mother was to amputate the arms. Having tried in vain to turn the child, amputation was performed, and delivery easily effected. The child lived, and the wounds healed.

The parents prosecuted the Doctor for malpraxis. The question being referred to the Royal Academy of Medicine, was committed to MM. Desormeaux, Deneux, Gardien, Moreau, and Adelon. Their first report was decidedly against Dr. H. It produced much discussion, and was referred back to the same committee for reconsideration. The subsequent report was less severe, but still censured the practice. A final decision is not yet made by the Academy, but the probability is that it will be against Dr. Helie. The legal tribunal will be governed by the decision of the Academy.

Chimney-sweepers exempt from Ophthalmia.—The physician of the Dispensary at Bristol, Eng., states that of 11700 patients with complaints of the eye, no chimney sweeper has ever yet presented himself, though one would suppose ophthalmia a frequent consequence of that occupation. The Surgeon of the Eye Infirmary at the same place also states, that for twenty years he does not remember a case of ophthalmia in any of the sooty brotherhood.

Remarkable Superiority of amputating by one Incision through the Integuments and Muscles.—This great improvement in the mode of amputating, which was formerly recommended by Louis, and unaccountably abandoned, is practised

and highly recommended by all the present surgeons of the Hotel Dieu, M. Dupuytren, M. Breschet, and M. Sanson. In thighs removed by the two former, and an arm by the latter, no tourniquet was employed in either case. The limb was grasped by an assistant, and pressure made on the principal artery. A single incision cut through the skin and muscles down to the bone, and a retraction of the skin and muscles, not inserted in the bone, was effected to the extent of three inches. The first retraction having been completed, the muscles attached to the bone were cut through by a scalpel, on a level with the others, and the bone sawed as usual. The stumps in all were remarkably fine, and the extremity of the bone was more than sufficiently covered.

Extraordinary retention of the Urine.—Dr. George Gregory states an instance of entire retention of urine in a lady, 105 hours after delivery. Complaining of an uneasy sensation in the region of the bladder, a Surgeon was sent for, who introduced a catheter and drew off seven measured pints of high colored urine. The muscular fibres of the bladder appeared to be somewhat paralyzed after (probably in consequence of distention), but no very serious injury followed this extraordinary occurrence. Dr. Gregory asks the question "what is the greatest quantity of urine which the female bladder has ever been known to contain?"

Case in which two ounces of concentrated Sulphuric Acid were swallowed.—A case of this description recently occurred at Malta. Two ounces of carbonate of magnesia were soon got down the throat, not, however, without great difficulty, and the patient was bled. Twelve hours after taking the acid the insensibility and coldness of the whole body banished hope of relief. Leeches were however applied to the epigastric

region, followed by a large blister to the same part, large doses of castor oil, and copious evacuation. These remedies were persevered in several days, and tartar emetic ointment rubbed on the throat, so as to produce an eruption. The symptoms unexpectedly yielded to this course, and the girl recovered.

Medical Society of Connecticut.

—At the annual Convention of the President and Fellows of the Medical Society of Connecticut, held at Hartford the 13th and 14th inst., the following officers were elected for the present year:—His Honor, John S. Peters, M.D., *President*; William Buel, M.D., *Vice President*; Joseph Palmer, M.D., *Treasurer*; S. B. Woodward, M.D., *Secretary*.

Committee of Examination.—Silas Fuller, M.D., Thomas Miner, M.D., S. B. Woodward, M.D.

Committee of Nomination of Professors.—Eli Todd, M.D., Andrew Harris, M.D., Thomas Miner, M.D.

Committee of Nomination of Superintendent of the Retreat.—Hon. Thomas Hubbard, M.D., Eli Ives, M.D., His Honor, John S. Peters, M.D., William Buel, M.D., George Sumner, M.D.

Massachusetts Medical Society.

A meeting of this Society was held on Wednesday last, an account of which is necessarily postponed till next week.

PRESIDENT ALLEN's Address, occasioned by the death of Dr. Nathan Smith, is acknowledged, and will receive early attention.

REPORT OF DEATHS IN BOSTON,

The week ending May 29, at noon.

Of brain fever, 1—consumption, 4—convulsions, 1—dropsy in the head, 2—dropsy in the chest, 1—drowned, 1—epilepsy, 4—fever, 1—intemperance, 2—lung fever, 1—old age, 2—sudden, 1. Males, 10—females, 8. Still-born, 1. Total, 19.

DIED.—At Dumfries, Pa., Dr. JOHN GIFFORD, an eminent Physician and Surgeon.

ADVERTISEMENTS.

CARTER & HENDEE,

*Publishers, Booksellers, and Stationers,*CORNER OF WASHINGTON AND SCHOOL
STREETS,**K**EEP constantly on hand, a large collection of English, French, Spanish and Italian BOOKS.

A complete assortment of MEDICAL BOOKS, and a supply of the best STATIONARY.

They have also for sale, Gardner's Twelve Inch GLOBES, and a supply of the most approved SCHOOL BOOKS.

All of which they will sell, at wholesale and retail, on the most liberal terms.

DENTAL SURGERY.

THIS day received by CARTER & HENDEE, No. 135, Washington Street,—A SYSTEM OF DENTAL SURGERY. In three parts.

1. Dental Surgery as a Science.
2. Operative Dental Surgery.
3. Pharmacy connected with Dental Surgery.

By SAMUEL SHELDON FITCH, M.D., Surgeon Dentist. *Denticum curam habeto ut bene digeras et diu vivas; laxatis dentibus laxantur et chylaceo officinæ; hinc mille malorum occasiones.*—Baglivi XIII.

March 17.

ep6w

CASEY'S APPARATUS FOR THE CURE OF DISTORTED SPINE.

THE Proprietor of the Dormant Balance for the cure of Distorted Spine, gives notice, that he has established an agency in this city, for the convenience of those who may wish to avail themselves of this invention. Physicians having under their care the subjects of this disease, or patients themselves, may have an opportunity of inspecting the apparatus, and examining the testimonials of its efficacy, at Mr. Charles White's, corner of Winter Street. It is recommended, however, that all patients availing themselves of this invention, should do it by the advice, and under the superintendence, of their own physicians, as it is only by medical opinion that the proper subjects of the machine can be deter-

mined, or the other proper measures to be made use of in conjunction with it, can be pointed out. The Proprietor expressly disclaims the idea that a cure is to be effected, in any case, by mechanical means alone. This machine has received the approbation of many of the most eminent medical men in this city and New-York. Upon application to the agent, references will be given, and written testimonials exhibited.

All letters, post-paid, addressed to J. Lincoln, No. 27, Fayette Street, will be attended to.

Boston, Feb. 6, 1829.

NEW BOOKS FOR CHILDREN.

JUST published by COTTONS & BARNARD, 184 Washington Street.

The Waning Moon, by the author of the Rising Sun; The White Palfrey, by the author of Thomas Mansfield; The Kind and Happy Child, by the author of the White Palfrey, &c.

FRENCH WATER COLORS.

COTTONS & BARNARD, 184 Washington Street, have for sale, the following Water Colors, of an excellent quality, manufactured by P. C. Lambertye, (France,) viz: Bistre, Raw Cassel, Burnt Umber, Raw Umber, Egyptian Brown, Vandyke Brown, Brown Pink, Seppia, Violet Lake, Carmined Lake, Sanders Blue, Prussian Blue, Mineral Blue, Indigo, Yellow Ochre, Yellow Mineral, Gamboge, Yellow Orpiment, Yellow Lake, Naples Yellow, Burnt Italian Earth, Burnt Sienna, Raw Sienna, Italian Earth, Crocus Martial, Green Lake, Sanders Green, Sap Green, Mineral Green, Prussian Green, Vermillion, Saturnine Red, Indian Red, Red Ochre, Red Orpiment, Flake White.

Also—a great variety of Newman's, Ackerman's, Reeves's and Osborne's Colors, in boxes and separate cakes.

SUNDAY SCHOOL CONVERSATIONS.

COTTONS & BARNARD, 184 Washington Street, have just published, Sunday School Conversations on some of the interesting subjects recorded in the New Testament. By the author of the Factory Girl, The Badge, James Talbot, &c.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

REDUCTION OF HERNIA.

From a Clinical Lecture by M. Dupuytren.

THE means of reducing hernia are various, and more or less efficient. The application of the hand, or taxis, is the most methodic and advantageous; it is modified according to the kind of hernia, its size, and other circumstances. Among the empirical methods adopted for the same purpose, there is one which approaches to this. The patient being laid upon his back, the feet are raised as high as possible, leaving the head and shoulders on the ground; the weight of the viscera in the abdomen acts upon the portion of bowel in the hernia, dragging it towards the interior, sometimes effecting the reduction. Here there is a mechanical action, not from without, inwards, as in the taxis, but in an opposite direction. Various topical applications are made to strangulated herniæ; some of these, as cold water, &c., are intended to diminish the volume of the parts in the sac. The action of cold produces several effects; it increases the tone of muscular parts, often, indeed, giving rise to sudden contractions, capable of overcoming the obstacle which has been opposed to the passage of the intestinal contents; so that stran-

gulated herniæ are sometimes speedily reduced by the affusion of very cold water. Ice, applied with perseverance, condenses the liquids and gas, and thus, also, facilitates their return into the abdomen. Other local applications appear intended to act upon the secretion of the mucous membrane of the part; such as cataplasms of senna, gratiola, &c. These are asserted to have good effects in the cases of elderly persons, in whom it is well known that the slowness of the peristaltic motion more frequently occasions overloading than actual strangulation,—a circumstance which must be kept in mind, that we may not trust too much to these measures where the patient is young, and the case one of genuine incarceration. As experience has demonstrated that the manner in which purgatives act is by facilitating the expulsion of the contents of the hernia, it may be asked why more active substances are not employed; for example, the croton oil?

The nausea and vomiting, so frequently present in such cases, does not always contraindicate the use of purgatives, as they sometimes succeed when more methodical treatment has failed. With regard to enemata, they ought never to be omitted unless there be evident symptoms of inflammation.

native that promised the slightest prospect of saving life.

13.—The patient, after being fully apprised of the *danger* and *uncertainty* of an operation, was left to consult her own feelings, and submit or not as she chose.

14.—Patient chose to undergo the operation, which was performed to-day at 11, A.M., by Dr. Warren, in the following manner:—The patient was placed upon the edge of the operating table, having her head and shoulders considerably elevated, and supported by pillows: her legs were flexed, knees separated, as far as they could be without producing too much uneasiness, and firmly supported. All things being now ready, the operator proceeded to dilate the external organs, as the *first step* in the operation: this being fairly accomplished, he then introduced into the vagina the two first fingers of the left hand, which were to serve in directing a *pointed hook* which was introduced with the right, and with which was now transfixed the neck of the uterus. Having proceeded thus far in the operation, a gradual force was applied for the purpose of dragging the uterus downward into view. The uterus being drawn down as far as seemed practicable, the operator retained it in this position, and with a common scalpel in the right hand, made a circular incision round the neck of the organ, removing with it about half the body and a portion of the diseased vagina. Just as he was making the last incision to complete this part of the operation, there was a tremendous gush of arterial blood, but the hemorrhage soon moderated. The whole hand being now introduced, some portions of the diseased part were found remain-

ing; these were removed with a hook and pair of tonsil scissors. No opening could be found through the peritoneum or bladder; the latter organ sunk into the vagina so as to be distinctly seen. The operation now completed, a sponge was placed in the vagina, and the patient removed to her ward.

After she was here, she continued almost in a state of syncope for two or three hours, after which there was considerable reaction. Pulse 100, and sufficiently full: had some color in the face. At 10, P. M., pulse nearly as before; rather thirsty; did not complain of great weakness; said she had a frequent desire to void urine, and believed she had passed some, two or three times since the operation. An examination was made, and the sponge protruding from the external organs was saturated with urine. A catheter was passed into the bladder, but the organ was empty; Ordered gruel and diluent drinks; if faint and low, stimulants and cordials.

15.—Pulse 104; abdomen tense and very sensible to pressure; has some control of the urinary organs; no hemorrhage; no dejection; slept some last night.

R. Infus. Sen. Comp. 3 iv. Statim.
Pill. Hyd. Submur. Comp. vesp.
sum.

Appl. Abdom. Foment. Si opus sit.

16.—Pulse 120, small and feeble at the wrist; countenance much sunken and cadaverous; one dejection yesterday from the cathartic; no hemorrhage; abdomen very tender; rested but little during the night; bad stimulants.

R. Pill. Hyd. Submur. quaq. hora
Stia.

Appl. Cerat. Canth. 7 a 9, Abdomini.

Bathe in warm spirit and water.
 Drink brandy and water, or wine.
 Take for nourishment beef tea or broth.

17.—Stomach was very irritable yesterday,—almost everything was thrown up from it; complained of but little local pain, but of great general uneasiness. Sunk gradually till about 4, P. M., before which time the pulse, at times, could not be felt at the wrist, after which there was some little reaction. At 11, P. M., began to sink again, and continued so to do till she died this morning at about 8.

18.—*Post-mortem Examination* by Dr. Warren, twenty-four hours after death, in company with Dr. Channing and the house Physicians, Parker and Gould, etc.—The abdomen was opened. The serous coat at the upper part of this cavity very slightly inflamed; toward the pelvis the inflammation was severe. No effusion of lymph was discovered, nor any step toward adhesion in any of the parts. Peritoneum, in the neighborhood of the uterus and covering the bladder, considerably inflamed, but not sufficiently to produce death. All the uterus, except the fundus, was removed: this was perfectly free from the disease, no portion of which could be found remaining.

This is the first operation for removing cancer of the uterus which has been practised here; and, though not successful in its termination, it warrants the belief that this very dangerous and terrible operation may succeed. This patient did not die of inflammation, nor gangrene or lesion of the peritoneum, but probably from the effects of the bleeding; yet she survived this for three days, and had she not been greatly exhausted be-

fore the operation by the pain of her disease, and the debilitating discharges accompanying it, she would undoubtedly have recovered.—The operation should be done at as early a period of the disease as possible.

II.

Spontaneous Cure of Cataract.

By J. B. ESTLIN, F.L.S.

On the 6th of June, 1825, I operated upon a man and woman, (brother and sister), both of whom had been blind for eight years with fully-formed cataracts. From the man, who was 56 years of age, I extracted both cataracts; but in the sister's case, as much difficulty was occasioned by the flatness of the cornea and the smallness of the anterior chamber, and as the operation on the right eye had proved more tedious than was desirable, I determined upon leaving the left eye untouched for some days. She was 66 years of age, and of delicate constitution. Her recovery, however, was very rapid, and the sight was so good that she declined having anything done to the left eye. In less than three weeks from the operation she returned to her home, in Glamorganshire, nearly fifty miles from Bristol, quite well, and able to read.

The brother's recovery was more protracted. The father of these patients had also been the subject of cataracts.

In a few weeks after her departure, I had the power of visiting the female patient at her own residence, and found her possessed of good vision in the eye which had been operated upon. I had also occasional opportunities of

bearing afterwards that she retained her sight. She was furnished with some *Vin. Opii*, to apply to the eye whenever she found it weak or inflamed.

Some months ago she sent to me for a supply of her drops, in consequence of their having proved of great service to her *left* eye, in which the sight was stated to be returning. Supposing that there was some mistake in this representation, I requested the Rev. E. P. Thomas, the respectable curate of the parish where she lived, to oblige me with some particulars respecting her; and by him I have been favored with the following minute statement:—

“About Michaelmas last (1828) one night, while in bed, Mrs. Lewis was seized with a most violent shooting pain in the middle of the left eyebrow, which occasionally descended to the eyeball; it did not affect any other part of the head, nor did it pass through the head; she has a distinct recollection that the pain was confined to the dark eye and its brow, in consequence of her fears having been excited lest the pain should extend to the eye on which the operation had been performed, and prove injurious to her sight. She has no remembrance of having received any injury, or of having come in contact with any object. She had a cold about the period of the attack, but not a severe one.

“The violent shooting pain before described continued for about a fortnight, when she was induced to apply the drops to the left eye. In a few minutes after the first application the pain ceased, and she continued free from it for some days; it then returned, but in a less severe de-

gree, and she was again relieved by the use of the *Vin. Opii*. A recurrence of the pain at intervals continued, but with diminished severity; and at length it ceased altogether.

“At the end of a fortnight after the first use of the drops to the left eye, she began to see with it. The first objects she discovered were the trees in the garden, which she saw through the window of her apartment. In the course of a week after, while walking in her garden, she could discern the bee-hives, and in a few days more she could perceive the bees. She is now able to read small print,” (whether with or without her cataract glasses is not stated—the former, I presume); “and since about the middle of last November she has experienced no pain. The eye upon which the operation was performed has continued free from pain, but it is at times so dim that she cannot read with it. This occasional dimness, before the recovery of sight in the left eye, also gave her great anxiety, lest she might altogether lose the power of seeing with it. The drops always relieved the inconvenience.

“The left eye has no diseased appearance, looking in all respects like that from which the cataract has been extracted.”

The account of this case affords satisfactory evidence of the spontaneous removal of a cataract. It would be interesting to know whether the lens was dissolved and absorbed *in situ*, or whether an opening in the capsule allowed of its passing into the anterior chamber, and there undergoing solution. The former occurrence is more probable, as the presence

of an opaque lens, with its nucleus undivided in the anterior chamber, generally keeps up a more constant state of irritation than is described in this instance.

Few, I believe, now entertain the idea that any stimulating application to the eye can exert an influence in producing the absorption of a cataract. This case favors no such opinion, as the Vin. Opii was not used until the symptoms accompanying the process of the removal of the cataract had existed for two weeks. The relief of similar symptoms, by the application of this liquid, is a well-known occurrence; and it is not to be wondered at that the patient and her friends should attach an importance to its efficacy to which it has no claim. Medical men, however, do not want examples to show the necessity of extreme caution in judging of the effects of remedies.

As a practical remark, connected with the subject of operations for cataract, I would observe that where *extraction* is performed, I consider the advantage of the patient to be greatly consulted by his not having both eyes operated upon at the same time.—*M. Gaz.*

III.

INFLAMMATION OF THE KNEE.

Treated according to the Plan of Mr. SCOTT, and communicated to the Medical Gazette.

A YOUNG woman, 28 years of age, applied to me on the 30th of July, 1828, on account of a disease in her left knee. A spot on the inner side of the head of the tibia was so exceedingly tender, that she could not bear to have it touched. There was neither

pain nor tenderness throughout the remainder of the joint, although there was a general fullness and tumefaction over the whole synovial membrane. She could neither straighten the limb nor bend it, without great pain; the slightest motion, or any attempt to bear weight on it, occasioned very great pain in the joint; the thigh and leg were much wasted; and she could find no easy posture for the limb, the half-bent position being that in which it was the least painful. She suffered so much at night as to impair her rest. She was of a fair complexion and delicate appearance. Pulse quick, tongue foul, bowels irregular, and the appetite impaired. She was evidently laboring under considerable disorder of the digestive organs. About a month before she applied to me, she first experienced a pain in the joint, which was tender and extremely painful on exercise. These symptoms increased daily, notwithstanding the use of various remedies, such as embrocations, the application of a blister to the joint, &c. Purgatives, leeching, fomentations, &c. &c., were now had recourse to, and absolute rest strictly enjoined.

8th.—The bowels have been regularly relieved by the medicines, the tongue is less coated, and appetite somewhat improved. The tenderness, pain, and swelling, are so much reduced, that the knee is now in a fit state for mechanical support, agreeably to Mr. John Scott's directions.

Applied the adhesive bandage, and ordered a tonic mixture and laxative pills.

20th.—The joint is much reduced in size; pain and tenderness

very much relieved, and her health improving. The mixture and pills continued; the knee supported with adhesive bandages.

23d.—In consequence of attempting to walk, the pain of the joint has returned.

Removed the dressings. Ten leeches to the knee; fomentations and cataplasms twice a day.

27th.—The pain and tenderness relieved; can move the joint without suffering.

A small quantity of Tartar Emetic Ointment to be rubbed on the knee, previous to the application of the adhesive bandages.

Oct. 2d.—She has felt no pain, except a slight smarting produced by the application of the ointment. The limb can be moved without any uneasiness, and her nights are no longer disturbed.

30th.—Continues to improve.

Adhesive bandages as before.

Dec. 27th.—The joint is now reduced to the natural dimensions; she has not the least feeling of uneasiness in it, and can walk and use it perfectly.

Feb. 6th, 1829.—Continues quite well.

IV.

*Experiments on Living Animals.**

[In transferring to our pages the following allegorical comment on a mode of investigation not uncommon in the profession, we have been influenced more by its ingenuity than its justico.]

I HAVE lately read with much interest a treatise "on the operation of poisonous agents on the

living body." The experiments therein detailed are of a pleasing nature, and the results strikingly important and valuable. Being myself friendly to the cultivation of experimental physiology, indeed, I may say, zealous in the cause, I have, by the help of persons similarly disposed, performed a great number of experiments on living animals. Some of these I lay with much satisfaction before the profession, inviting, at the same time, such of my brethren as find the subject amusing, to repeat my experiments. The importance of the conclusions I have deduced, renders a repetition of them the more to be desired.

Experiment 1.—Having an ear peculiarly fitted for the nice discrimination of sounds, I had often remarked the very peculiar cry of the dog when suffering exquisite pain. In order to ascertain if this particular sound were modified in the varieties of the canine race, I had six dogs arranged in the following order, at intervals of a yard,—mastiff, hound, spaniel, terrier, setter, pug. The right eye of each being scooped out, and a hot ember put into the socket, the effect was immediate and surprising, and I may add, gratifying. It is difficult to convey an idea of it in words,—this, however, is the less to be regretted, as the experiment is easily repeated. "I may just observe that I have discovered that boiling linseed oil poured into the ear elicits the sound in question, to the full as instantaneously.

Experiment 2.—The power of resistance in the valvuli coli has often been discussed, but not, so far as I know, ascertained with precision. To determine this

* Medical Gazette.

point I procured four tarriers, nearly of a size, and arranged them thus;—the œsophagus of one, separated and brought out, was inserted into the anus of another, and secured so as to make the alimentary passages of the four into one continuous canal. A forcing pump being adapted to the fundament of the hindermost dog, and a known force employed, I found a column of water, equal to ten pounds, force the valve of the first dog; one equal to forty pounds, the second valve; one hundred and sixty pounds, the third; six hundred and forty pounds, the fourth, and so on,—the force required increasing in a geometric ratio. A few handfuls of small fish-hooks, thrown into the water employed, excited a variety of interesting contortions in the dogs.

N. B.—Coarsely pounded glass may be used instead of the fish-hooks.

Experiment 3.—The degree of heat requisite for separating the hair from the skin of a living animal not having been satisfactorily determined, I procured six rabbits, which I treated as follows:—Two, immersed to the neck for one minute in water at 180 deg., shed only the finer down in consequence. Another pair, completely immersed for the same space of time, at the temperature of 206 deg., easily parted with the whole of the hair, except the whiskers. The remaining couple, immersed at the boiling point, furnished the same result as the preceding two. I now put the entire six into an empty stew-pan, heated to 400 deg., with the view of ascertaining what degree of heat would cause their whiskers to fall off. On taking out the

animals after five minutes had elapsed, I found they were unfortunately dead, with the beard burnt and quite friable, but still adhering at the roots. The latter point, therefore, namely, the degree of heat at which the whiskers of the rabbit fall off, will require further experiments; and I have the gratification to announce to the profession generally, that a series on this interesting subject are now being performed by two able friends and myself, which will be published as early as possible.

In conclusion, I cannot help alluding to the objections which some make to experimental physiology on the score of cruelty. It seems to me doubtful whether the inferior animals are really susceptible of pain in the sense meant by the objectors. At least I think their struggles, and the noise they make in the hands of the operator, may be explained on a very different principle, which I mean to enlarge upon at a future opportunity. S.

V.

TIC DOULOUREUX.

Discussion on this Subject in the Medical Society of London.

DR. RAMADGE related a case of tic douloureux, brought on in a male patient, 40 years of age, by the external application of zinc and copper, for the purpose of producing a galvanic sensation. Most excruciating pain in the cheek, passing across the eye, towards the frontal sinus, was thus produced. There was a spot in the red part of the upper lip, which, upon being touched, the pain was excited. The patient was of a plethoric habit, and had

lived rather freely. For some time he had suffered from dyspepsia. The treatment consisted in extracting blood; the exhibition of laxatives, followed by the use of the carbonate of iron, combined with the carbonate of soda. The complaint was entirely removed. The pain, in this case, did not run along the course of the nerves usually affected, but perpendicularly.

Dr. James Johnson, after remarking that neuralgic affections were much more frequent than they had been, noticed paralysis of the portio dura of the seventh pair of nerves, as an affection that was occasionally occurring. It occasioned drooping of the eye; the drawing up of one side of the face had, in some of these cases, excited fears in the minds of the friends as to the existence of cerebral disease; but the disease was in the branches of the nerve spoken of. The disease was sometimes of long duration. In one case eighteen months elapsed before the power of the nerves was restored. Another case went on for nine months. Dr. J. had seen other cases. Some attention was required to be paid to the eye; for, as the patient could not shut the eye, it remained unclosed during sleep: it required, therefore, to be shut previous to the patient's going to rest; otherwise, the eye remaining open, inflammation of the organ took place. In these cases the sensation of the part was not diminished, the nerves affected being nerves of motion, not sensation. There was another affection of these nerves, or the muscles which they supplied, which consisted in a constant twitching of the part of the face to which the branches of the nerve were distributed. The

disease, in all the cases which had fallen under Dr. Johnson's observation, had been induced by "a draught of cold air;" it was a state of irritation of the muscles, rather than a paralytic affection. No treatment had, in these cases, appeared to be of any use.

Dr. Shearman observed that tic douloureux had, of late years, been much more frequent than formerly, or that transient painful affections had been dignified with "tic douloureux." He (Dr. S.) had found the ext. belladonnæ a very efficacious remedy in the disease in question; the dose he had given was about two grains every eight hours.

Mr. Shearly remarked that he had used, in this disorder, opium, combined with belladonna, externally; exhibiting, also, the carbonate of iron every eight hours. In one case Mr. S. gave, with success, strong camphor mixture, combined with the ammoniated tincture of the valerian and the pilula gummosa.

Mr. Taunton and Mr. Iliff adverted to some cases related by Mr. Bailey, of Harwich, in which belladonna had been given. That gentleman had begun with quarter-grain doses.

Mr. Drysdale mentioned a case of tic douloureux occurring in a lady. After all the usual remedies had been tried in vain, the disease was removed by the use of a hot pillow.

Dr. Ryan related cases of tic douloureux in which he had seen stramonium used internally and externally with benefit. Dr. R. was surprised that contra-irritation at the base of the brain by setons, perpetual blisters, &c., had not been resorted to in neuralgic affections.

SKETCHES OF PERIODICAL LITERATURE.

COLICA PICTONUM.

A WRITER in the London Medical and Physical Journal advances the opinion that this disease indicates inflammation of the intestinal canal, and should be met with remedies calculated for the relief of inflammation, such as general and local bleeding, fomentations, &c., instead of the usual purgative treatment. With regard to the latter, it is said that it excites an ineffectual effort in the canal, productive of increased local determination and aggravation of all the symptoms. In the case adduced in support of this theory, salts, calomel, and rhubarb, had been administered, without producing any cathartic effect; the disease had reached the sixth day, and was rapidly increasing. The medicines were discontinued; ten ounces of blood were taken from the arm, and eighteen more by cupping from the abdominal surface. The appearances were improved by this treatment, but no evacuation followed. Next day the cupping was repeated on the abdomen, to the extent of thirty ounces; and the fomentations and enemata were continued. At the succeeding day's visit it was found that the bowels had been evacuated six times, with relief from the pain. The case afterwards did well.

That the disease called painter's colic is frequently accompanied with inflammation of the intestines, there is no reason to doubt; and where this is the case, the antiphlogistic mode of treatment ought certainly to

be resorted to. Many cases of the disease occur, however, in which no symptom of inflammation is to be found, and in which the same mode of treatment would be useless or injurious. With regard, also, to obtaining evacuations from the bowels, we apprehend that in the majority of instances some of the cathartics in common use will effect this object; and as it is important to avoid delay, the remedies calculated to produce a direct effect on the canal, are preferable to those the operation of which is more uncertain. These considerations ought always to induce practitioners to make trial, in the first instance, of cathartic medicines, properly so called, in conjunction with such other treatment as the circumstances of each particular case may seem to require. Dr. Good, who gives a very judicious view of the disease, proposes three indications in its treatment,—to subdue inflammation, if present; to relieve pain, and to restore the due peristaltic action of the bowels. That this latter object cannot always be answered by purgatives, we are well aware; but those cases in which they fail so to do, are to be at once regarded as alarming in their character, since a large proportion of them resist every mode of treatment which can be devised. Even in the case above referred to, the direct purgative treatment seems hardly to have received a full trial, and might, if persevered in, have proved ultimately successful. For our own part,

we have seldom failed to cure the disease by the free administration of Extr. Hyosciam. and Epsom salts, with cold affusion to the lower extremities.

SUPPRESSED PERSPIRATION.

The Effect of powerful sudden Impressions made on the Surface of the Body.

THE notion that febrile diseases are frequently produced by suppressed perspiration is probably as old as the science of medicine; but the severity of the application of this principle has, we apprehend, rather diminished in later times. To a certain extent the system of most persons is able to sustain the shock of cold applied to the perspiring skin, without injury and even with benefit. The hardy Russian quits his vapor bath, heated to 130 deg., and plunges fearlessly into the snow; and even the most delicate and tender find a cold bath more grateful and more beneficial when a little previous exercise has produced a tendency to the surface. The momentary reaction which is thus produced, so far from disordering the functions, will be found, in most instances, materially to aid their performance. But to infer from these facts that sudden changes may, under all circumstances, be encountered with impunity, would be a fatal error, since in debilitated subjects they are often followed by the most disastrous effects. The following, though an extreme case, will illustrate the danger of this sort of imprudence, better than any reasoning on the subject.

A carpenter, about 40 years of age, was affected with an extensive lepro-psoriaceous eruption. After trying various remedies to no purpose, he at length commenced the use of sulphur fumigation. Having taken a bath at the house of Mr. Green, Surgeon to St. George's Hospital, in London, he walked thence to the Hospital in a cold easterly wind. This was the 17th of December. On the same evening he was attacked with symptoms of fever, which the next morning were found very much increased, and accompanied with those of pulmonary inflammation. Blisters and antimonials were resorted to, with occasional doses of calomel and other medicines which the case seemed to require; but to little purpose. He died on the 24th of the month, the eighth day of the disease. The most remarkable post-mortem appearance was that of half a pint of serum, mixed with pus, contained in the cavity of the left pleura. The corresponding lung bore marks of severe recent inflammation, corresponding to the symptoms which were present during life. The right side of the chest was free from disease.

ERGOT OF RYE.

ACCORDING to Dr. Marshall Hall, this article possesses considerable control over chronic uterine discharges. In a very severe case of menorrhagia, alternating with leucorrhoea, which had continued, with occasional variation in degree, for four years, the ergot was given in doses of five grains, four times daily, beginning just before the expected ap-

pearance of the catamenia. This was retarded in its appearance for four days, was moderate in quantity, and not followed by the leucorrhœa, which in fact entirely disappeared. In several cases in which this last disease existed by itself, the ergot was employed with decided success. The benefit of the remedy is usually experienced at the end of five days, but it is best to persevere in its use for a somewhat longer period.

POISONING BY ENDERMIC MEDICATION.

Two cases are recorded in the journals in which the external use of corrosive sublimate was followed by fatal consequences. Two brothers, affected with a cutaneous eruption resembling itch, attempted its cure by rubbing into the skin the muriate of mercury, previously mixed with hog's lard. The quantity of the sublimate used by each was about an ounce. It produced vesication of the parts to which the ointment was applied, severe pain in the bowels, with other symptoms of extensive inflammation, dysenteric discharges and sanguineous vomiting. Death ensued in the first instance on the eleventh day; in the second on the fifth. On examination of the last, the stomach and small intestines were found highly inflamed, with small spots of ulceration in the former. The lower portion of the colon and rectum were in a state of complete mortification, and there was a great quantity of bloody serum in the cavity of the abdomen.

ACETATE OF LEAD.

SOME interesting facts and speculations, in regard to this substance, are contained in a late number of the Medical Gazette. With the view of ascertaining how far the apprehensions entertained from its use in large quantities were well founded, a medical gentleman administered it to himself, at the rate of ten grains a day for seven days, combined with opium in the proportion of one-eighth part. After he had taken this quantity, pains were produced in the bones, and the mouth became sore, as in mercurial ptyalism. The former symptoms yielded to a moderate dose of sulphate of magnesia, and the latter went off at the end of a few days. The intestinal affection produced in this instance had not the usual symptoms of painter's colic. Indeed it seems to be well established, that the timidity which has been prevalent in regard to the medicinal use of this article, is far from being justified by facts. The result of our experience appears to be that the colica pictonum is produced by a long-continued action of the lead on the system, which gradually deranges the digestive functions, impairs the secretions, and induces costiveness; and never, or very rarely, by its use in decisive doses and for a limited time. Doses of one, and even two drachms of the acetate, have been taken at once, and followed by no effect but purging; and there can be little doubt that, in cases indicating its employment, much larger doses than those in common use may be exhibited with advantage.

FEMORAL ANEURISM CURED WITHOUT AN OPERATION.

THE Provincial Gazette contains the history of a femoral aneurism which was cured by pressure. The tumor was enormous, and the distressed patient incapable of walking without a crutch. A flannel roller was first applied, so as to produce moderate pressure on the aneurismal tumor. A few days after, on the 27th of September, the swelling had subsid-

ed, and it was discovered that so great was his relief from the bandage, that he had tied a silk handkerchief tight round the thigh, for the purpose of increasing the pressure. Mr. Sy-fred, the Surgeon of the Hospital, applied a tourniquet and splint, and on the 8th of October every vestige of the disease was removed. That this case is related in the March number of the Provincial, is our only evidence that the cure was permanent.

BOSTON, TUESDAY, JUNE 23, 1829.

TRIBUTE OF RESPECT TO MR. COOPER.

OUR readers probably recollect that much excitement was produced, a few months ago, in the British metropolis, by a garbled report in the Lancet of an operation for the stone, performed by Mr. Bransby Cooper. Some difficulties which were unexpected, rendered the operation of greater duration than usual, and the opportunity was not lost by the Editor of the Lancet, to gratify his propensity to vilify Sir Astley and his distinguished relative. Mr. B. Cooper instituted a suit against Wakley, Editor of the Lancet, for a libel, and recovered, with 100 pounds damages. We learn with pleasure that the students of Mr. C. have presented him a silver vase, with their congratulations on the successful result of this suit. Such testimony of respect is alike honorable to both parties, and was unquestionably called for by the peculiar circumstances of the case. Mr. Cooper's cause is that of the profession in general; and his tri-

umph is that of justice and good principle over the mean arts of envy and malice. If the editor of, or the hireling contributor to a medical paper, is permitted to attend the public hospitals for the purpose of laying before the world garbled and obscure accounts of all such operations as have in any way terminated unfortunately, including the most disgusting details, and exaggerating every circumstance which can tend to reflect discredit on the operator, it is evident that from such attacks no reputation, however good, can afford an entire security. The libel is not merely presented to medical men who may make the necessary inquiries as to the facts; it is read with avidity by the ignorant as well as the learned; and the multitude, ever ready to believe the worst, will give it credit almost in proportion to its grossness. The result of this trial, therefore, as warning malicious slanderers that they are not out of the reach of justice, is a benefit to the

whole community ; and the proceeding of the students of Mr. C., by at once testifying their contempt for the libeller and their respect for the object of his malice, evinced a sense of what was due to the dignity of the profession and to the cause of truth and justice. For the particulars of the ceremony, which are highly interesting, we refer to the London Medical Gazette, for May 2d, in which the address of the students, and Mr. C.'s reply, are both given entire.

HYPOCHONDRIASIS.

WE are apt to believe a merry companion the happiest fellow in the world, and envy him, perhaps, his light heart and airy spirits ; but such men have hours of melancholy, when the spirits sink, and a gloom comes over them, deeper and darker than is ever known to their less excitable companions. A man may be cheerful on paper, though he has a heavy heart, and brilliant in company, though insufferably wretched when left to commune with his own soul.

The extremes of low and high spirits, which occur in the same person at different times, are happily illustrated by the following case, related by Dr. Rush :—" A physician, in one of the cities of Italy, was once consulted by a gentleman who was much distressed by a paroxysm of this intermitting state of hypochondriasm. He advised the melancholy man to seek relief in convivial company, and recommended him in particular to find out a celebrated wit by the name of Cardini, who kept all the tables of the city, to which

he was invited, in a roar of laughter, and to spend as much time with him as possible. ' Alas ! Sir,' said the patient, with a heavy sigh, ' I am that Cardini.' "

FOREIGN BODIES IN THE LARYNX MISTAKEN FOR CROUP.

IN our number for May 26th, we inserted a communication from Dr. J. V. C. Smith, giving an account of a child whose vision was affected apparently by the irritation of a foreign body in the larynx. In Dr. Smith's interesting detail of this case, it will be recollected that the difficulty was supposed at first to be an attack of croup, and treated as such. Since the publication of the above, we have remarked several cases described, and others referred to, in which the entanglement of foreign substances in the larynx or trachea, have produced symptoms very much resembling those of croup. Dr. Reiche is of opinion that these symptoms are not only most easily, but also most frequently, mistaken for croup. The practical caution to be derived from these instances needs no illustration.

Dr. R. also remarks that the best diagnostic marks by which the croup may be distinguished from the accident alluded to, is the frequent cough, and the peculiar alteration in the sound of the cough and the voice. —We might add, also, a careful inquiry into the history of the case.

INJURIOUS EFFECTS OF MERCURY ON THE FUNCTIONS OF THE UTERUS.

Six cases are found among the late records of the Paris venereal hospitals, in which abortion was the evi-

dent effect of mercurial treatment. Miscarriages have always been frequent among the inmates of this charity; but they have usually been attributed to the disease rather than its specific remedy. The cases alluded to seem to show very clearly that this explanation is not correct, and that mercury produces an injurious effect on the functions of the impregnated uterus. Dr. Colson, who relates the cases, has also given others to show that this mineral has an effect on the unimpregnated uterus, to interrupt its functions, producing either menorrhagia or amenorrhœa.

PARTIAL DISLOCATION OF THE KNEE.

A COOPER, æt. 64 years, was lately carried to the Hospital de la Charité, who had the knee partially dislocated by a fall from a horse. The bones of the thigh and leg formed an angle with each other, the apex of which was inward. The head of the tibia was slipped inward, and the femur outward. Reduction was attempted by extension, but this not succeeding, the operator placed his knee against the projecting extremity of the femur, and then pulled the head of the tibia toward him with great force. The effort succeeded. Soon after, the limb not appearing quite straight, was confined in the apparatus for fractures three weeks, when a degree of deformity remaining, suspicions were entertained that the internal lateral ligament was ruptured. The apparatus, with bandages, and pressure on the inside of the joint, continued a week, were found to remedy the evil; and at

the time of the report, five weeks after the accident, the leg was in proper form, but the patient was unable to walk without the aid of sticks.

TALIAHOTIAN OPERATION.

THIS operation has been successfully performed at the Glasgow Infirmary. The subject of it, a lady, æt 37, being destitute of one half of that comely and important feature, the nose, desired, more for convenience than appearance, that the surgical art might try its best to accommodate her with the other half. The right ala and column remaining, the defective portion was very respectably supplied by cutting a flap from the left side of the forehead, and bringing it down into the proper place. A roll of India rubber preserved the rotundity of the flap, the edges of which were secured by four sutures. The cicatrix on the forehead became very narrow, and the twist of the flap was left undivided, as its prominence added to the beauty of the renovated feature.

CANCER OF THE HUMAN MALE BREAST.

A CASE of this description was carried to Guy's Hospital, London. The patient, an unmarried man of 30 years of age, received a blow on the nipple five years before, which was followed by a soft tumor, the size of which gradually increased for two or three years. It was then exposed to several successive blows, became harder, and the seat of lancinating pains. At the time of admission it was the size of a fist, and very hard.

This tumor was removed by Mr. Cooper, and a dissection of it left no doubt of its scirrhus nature. The patient bore the operation ill, and the reporter says he possessed "a womanly disease, a womanly aspect, and a womanly spirit." We object to this declaration, as unjust and ungenerous to the fair subjects of this disease: the reporter would have evinced a more accurate practical observation of such cases, if he had said of this man, he possessed a womanly disease, a womanly aspect, but not a womanly fortitude!

EXTRACTION OF FOREIGN BODIES FROM THE EAR.

M. DUFUTREN has invented a very convenient instrument for extracting foreign substances from the meatus auditorius. It is a pair of slender forceps, bent twice at right angles, so as not to obstruct the view of the surgeon into the passage. The extremities of the arms are small and spoon-formed, pierced with fine holes, and roughened with small teeth.

DIFFERENT EFFECT OF POISON ON CARNIVEROUS AND HERBIVEROUS ANIMALS.

By a series of experiments, Professor Mayer, of Bonn, has ascertained that the extract of the coriaria myrtifolia, (myrtle-leaved sumach), which acts as a violent narcotic poison on all carnivorous animals, may be swallowed by those that are herbivorous without injury. Large doses of the extract, given by the mouth, or applied to external wounds, produced on the rabbit, e. g., no sensible effect.

Fatal Aneurism of the Abdominal Aorta.—A man, 24 years of age, had occasional fits of vomiting and pain in the belly, and a preternatural fulness was perceptible to the left of the linea alba. He died suddenly. A large quantity of blood was found in the peritoneum; and "in the space between the liver and smaller curvature of the stomach was an aneurismal sac, of the size of a large orange." It had burst anteriorly under the edge of the liver, by an aperture too small to admit the point of the little finger. Dr. Malden is of opinion that the aorta was ruptured during the act of vomiting.—*M. Gaz.*

Medical Publications.—The Editor acknowledges the receipt of the following works:—

Memoirs of the Life, Writings, and Character, literary, professional, and religious, of the late JOHN MASON GOOD, F.R.S. F.R.S.L. Mem. Am. Phil. Soc. and F.L.S. of Philadelphia, etc. etc. By OLINTHUS GREGORY, Professor of Mathematics in the Royal Military Academy, &c. &c. With the Sermon occasioned by his death, by CHARLES JERRAM, M.A. Boston: Published by Crocker & Brewster, &c. 1829.

Journal des Progrès des Sciences et Institutions Médicales en Europe, en Amérique, &c. 1st vol. Paris, 1829.

Also, the last number of the following periodicals:—

The New-York Medical and Physical Journal; The American Journal of the Medical Sciences, Philadelphia; The Western Journal of the Medical and Physical Sciences, edited by Daniel Drake, M.D., Cincinnati, Ohio; The Gazette of Health, edited by Richard Reece, M.D., London.

REPORT OF DEATHS IN BOSTON,

The week ending June 12. at noon.

Of abscess on the lungs, 1—convulsions, 1—consumption, 4—croup, 1—dropsy in the brain, 1—lung fever, 1—old age, 3—scald, 1—unknown, 4. Males, 10—females, 7. Total, 17.

ADVERTISEMENTS.

CARTER & HENDEE,

Publishers, Booksellers, and Stationers,
CORNER OF WASHINGTON AND SCHOOL
STREETS,

KEEP constantly on hand, a large collection of English, French, Spanish and Italian BOOKS.

A complete assortment of MEDICAL BOOKS, and a supply of the best STATIONARY.

They have also for sale, Gardner's Twelve Inch GLOBES, and a supply of the most approved SCHOOL BOOKS.

All of which they will sell, at wholesale and retail, on the most liberal terms.

MANUEL FOR THE USE OF THE STETHESCOPE.

CARTER & HENDEE have recently published,—A short Treatise on the different Methods of investigating Diseases of the Chest. Translated from the French of M. Collins, by W. N. RYLAND, M.D. From the third London Edition, with Plates, and an Explanatory Introduction, by a Fellow of the Massachusetts Medical Society.

In preparing for the American press the English translation of the well known and highly useful work of M. Collins, which translation has passed through three editions in England, the Editor thinks he can render it more acceptable by dispensing with the various prefaces and introductory remarks which encumber the last edition, and by substituting in their place an entirely new introduction, which is intended to embrace the amount of all that is important in the prefaces alluded to, as well as that which is contained in various abstracts and reviews which have appeared of treatises upon the different methods of investigating thoracic diseases, and in some other works which are not generally before the profession in this country.

C. & H. keep constantly for sale Stethoscopes of the most approved form.

FRENCH WATER COLORS.

COTTONS & BARNARD, 184 Washington Street, have for sale, the fol-

lowing Water Colors, of an excellent quality, manufactured by P. C. Lamber-tye, (France,) viz: Bistre, Raw Cassel, Burnt Umber, Raw Umber, Egyptian Brown, Vandyke Brown, Brown Pink, Seppia, Violet Lake, Carmined Lake, Sanders Blue, Prussian Blue, Mineral Blue, Indigo, Yellow Ochre, Yellow Mineral, Gamboge, Yellow Orpiment, Yellow Lake, Naples Yellow, Burnt Italian Earth, Burnt Sienna, Raw Sienna, Italian Earth, Crocus, Martial, Green Lake, Sanders Green, Sap Green, Mineral Green, Prussian Green, Vermillion, Saturnine Red, Indian Red, Red Ochre, Red Orpiment, Flake White.

Also—a great variety of Newman's, Ackerman's, Reeves's and Osborne's Colors, in boxes and separate cakes.

CASEY'S APPARATUS FOR THE CURE OF DISTORTED SPINE.

THE Proprietor of the Dormant Balance for the cure of Distorted Spine, gives notice, that he has established an agency in this city, for the convenience of those who may wish to avail themselves of this invention. Physicians having under their care the subjects of this disease, or patients themselves, may have an opportunity of inspecting the apparatus, and examining the testimonials of its efficacy, at Mr. Charles White's, corner of Winter Street. It is recommended, however, that all patients availing themselves of this invention, should do it by the advice, and under the superintendence, of their own physicians, as it is only by medical opinion that the proper subjects of the machine can be determined, or the other proper measures to be made use of in conjunction with it, can be pointed out. The Proprietor expressly disclaims the idea that a cure is to be effected, in any case, by mechanical means alone. This machine has received the approbation of many of the most eminent medical men in this city and New-York. Upon application to the agent, references will be given, and written testimonials exhibited.

All letters, post-paid, addressed to J. Lincoln, No. 27, Fayette Street, will be attended to.

Boston, Feb. 6, 1829.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

THE BOSTON
MEDICAL AND SURGICAL JOURNAL.

VOL. II.]

TUESDAY, JUNE 30, 1829.

[No. 20.]

I.

Communicated for the Medical and Surgical
Journal.

POISONING BY MILK.

*History of the Cases of Poisoning
by Milk which recently occurred
in a Family in this City, by F.
J. HIGGINSON, M.D. ; together
with an Analysis of the Milk, by
CHAS. T. JACKSON, M.D.*

History.

On the 21st of May last, at about 11, A. M., I was called to see a family said to have been poisoned. The family consisted of seven, of whom four, viz., the lady of the family, her child (a girl of four or five years), a young woman who had been maid in the family and who had just recovered from a pretty severe illness, and a little girl, also a servant. The three remaining members of the family were males, and were not at home. About two hours after breakfast, that is, at about 9, A. M., the females, in quick succession and with little warning, were taken with nausea and vomiting. All, with the exception of the little servant girl, who refused, soon got full doses of ipecacuanha, which, by the time of my arrival, had produced its full effect. At this time the lady was complaining of violent pain in the stomach, which had come on a few minutes before, the vomiting having previously

ceased. Her countenance was very pale, her skin cool and moist, and her pulse feeble, though not extremely so. She was soon put into bed. Her child was lying in the lap, quiet, and unwilling to be disturbed, but not in much apparent suffering. She also was very pale, her lips slightly livid, her skin cool and moist, and her pulse feeble. She had vomited a great deal, and was still occasionally retching. The young woman was the greatest sufferer. Her countenance was deadly pale, her lips and eyelids sublivid, and her expression wild. As I entered she was tossing her arms about, and stamping violently on the floor. She was however soon calmed, the fit being evidently of an hysteric character. She had continual and violent retchings, and complained of severe pain at the stomach. The little girl was apparently more easy. Soon after her attack she had a slight dejection, which relieved her for some time.

From the mode of the attack, and their being simultaneously and similarly affected, there could be no doubt that the phenomena arose from a common cause, and that, some noxious substance introduced into the stomach. I found, on inquiry, that their breakfast had consisted, as usual, of bread and butter, milk, eggs, and coffee. No fish had been eaten in the fa-

mily for two days previously. Some, but not all of the family, had eaten cheese the preceding night. Whatever the poison might be, there was no question that it had been evacuated, as far as possible, by the vomiting, and the first indication was to check the inordinate action of the stomach, and, if possible, allay the pain. Dr. George Hayward, who had been sent for, arriving soon after me, was of the same opinion; and by his advice, laudanum was administered, in large doses, to all. Where it was not retained, opium pills were given with success.

Very soon our attention was called to the *master of the house*, who had come home on hearing of the sickness of his family. He was seized in the same manner with the rest. Soon after this, one and then the other of the two remaining members of the household came home sick from their places of business. Laudanum was given to all three, and whether owing to this, or some other cause, they suffered far less than those first affected. As soon as the stomach became sufficiently quiet, the comp. infus. sennæ was given, and repeated in moderate doses. Under this treatment they mostly improved. In one or two cases the coldness of the surface increased; in the child it became extreme, and for some time there was no pulse at the wrist;—she came to, however, under the use of warm water and paregoric. Before 2, P. M., they were all well enough to be left. Dr. Hayward saw them again before 4 o'clock; and by that time, the medicine having opened the bowels, they were all decidedly relieved, with the exception of the little girl who was mentioned as less ill than the rest.

She had refused medicine, and accordingly suffered longer than the others. On the next day a good deal of weakness was the only ill effect perceptible. As it was a great object to ascertain, if possible, the nature of the deleterious substance, I brought away about five ounces of water, and as much milk, for chemical analysis. The water I took from the copper boiler, in which the water used at breakfast had been boiled. The vessel had not been cleaned for many days.—So important a matter is this, that it is a regulation both in our army and navy, that the copper cooking utensils shall be inspected once a day by the surgeon or his assistants.—The water came through leaden pipes, but was the same that they had used for a year. The milk was taken from an earthen pan, the same which that used at breakfast had been taken from.

The analysis of the milk and the water was performed by my friend, Dr. Charles T. Jackson, whose familiarity with the processes of analytical chemistry entitle the results of his investigation to the fullest confidence. Not being able to see him when I left the substances at his house, I could give him no clue to his discovery. The next day, he told me that he had detected, in the milk, *subacetate of copper* in very sensible qualities. I have been unable to discover by what means the poison was communicated to the milk. The account of the analysis drawn up by Dr. Jackson, and which is subjoined, puts the fact beyond question. It only shows the necessity of great care, on the part of house keepers, &c., not only as to the vessels in which articles of food are kept and preserved, but also as to the

places where they are deposited.

Three only of the family took milk alone. The quantity taken by the others was, of course, very small, as it was taken in coffee. What is, perhaps, worthy of remark, is that these last took sugar with their coffee,—and this is the substance which Orfila says is the best antidote to the poison of verdigris. He states, to be sure, that large quantities are necessary for it to be of any avail; but in these cases the quantity of sugar must unquestionably have been to the quantity of verdigris, at least, as 30 to 1. Those who took milk alone, however, were the first seized.

F. J. HIGGINSON.

Analysis.

By request of my friend, Dr. Higginson, I made a chemical analysis of the milk and the water which were suspected to have contained some deleterious matter, by which a family of seven individuals were dangerously affected with symptoms such as usually result from the introduction of some virulent and very active poisonous agent into the stomach.

As several accounts in the papers of the day have stated the results of this examination, and there does not appear to be a correct understanding of the case as to the source of the poisonous matter, I have, by desire of Dr. H., consented to publish the following statement from my notes, made at the time of performing the analysis of the articles in question.

The water used by this family being subjected to a strict chemical examination, was found free from any deleterious substance, and will not require any further attention.

The whole quantity of milk sent to me for examination weighed 4½ oz. It had a turbid appearance, though not coagulated, or sour to taste or smell. There was no sediment in the phial in which it was contained.

Process 1st.—A portion of the milk was taken, and being placed in a wineglass, was treated with a drop of diluted nitric acid, to separate the curd and the albumen of the milk, and to retain whatever foreign metallic ingredient it might contain in solution. After the curd &c. had subsided, the clear supernatant fluid was poured off, and then searched, by chemical reagents and tests, for such substances as it appeared probable it might contain. My first suspicions fell upon the oxide of *Lead*, with which coarse earthen ware is generally glazed; but neither sulphuric acid nor phosphate of soda gave any precipitate, whence we may infer it did not contain any salt of lead.

Process 2d.—Another portion was tested for arsenic by ammonia and nitrate of silver, but did not manifest any indications of its presence. The curd was also examined in like manner, without discovering any foreign matter. The only remaining article which could be suspected was *Copper*, and this was, as we shall see presently, the true source of the baneful effects on the family concerned.

A polished lancet blade being immersed in the milk which had not been treated by nitric acid, did not become tarnished; but, when immersed in the solution from which the curd had been separated by nitric acid, the surface of the steel became immediately covered with a coating of metallic copper. Lest the acid itself might be suspected to be impure, a portion of it diluted

ed with water, was tested by polished iron and by ammonia ; but it was found to be pure.

From the circumstance of the copper not being separated from the milk by the polished iron, it appears that the copper must have existed in the state of an oxide dissolved by the oily matter of the milk, or that it existed in the state of a subacetate, all the acid salts of this metal being incompatible with the uncoagulated state of the milk.

To determine how much copper the milk contained was the next and the last step to complete the analysis. The method pursued was the most simple; and, although it may be regarded by some scientific analysts as somewhat coarse, it is sufficiently correct for toxicological purposes, and has the advantage of being exempt from all suspicion of impurity in the chemical reagents employed. This process was as follows :—

Two ounces by weight of the poison milk was poured into a glass evaporating basin, and gradually evaporated to dryness over the Argand Lamp furnace, and the heat continued until the residuum was converted into a spongy carbonaceous mass, when it was removed, pulverized in a Wedgwood mortar, and placed in a crucible of platina, over a small furnace of charcoal ; the crucible and contents were then heated to ignition by urging the fire with the bellows. After the carbon had been consumed, the ashes contained in the crucible was removed, and treated with diluted nitric acid, which dissolved all but a few specks of carbon that had not been consumed. The solution, which was of a blue color, was then divided into two portions equal by measure ; one of these was treated to excess of saturation by ammonia,

when it became of a fine blue color, without any precipitate. The other half was poured into a conical measuring glass, and a rod of polished iron wire immersed in the solution and allowed to remain all night undisturbed. The next morning the copper had precipitated entirely in a metallic state upon the iron rod, and being carefully removed and dried between folded blotting paper, weighed half a grain, which is equivalent to four grains of the peroxide of copper. The small portions of milk remaining having become sour, I was unable to pursue the investigation further to determine the precise state of the oxide in the milk,—to determine which would be very difficult, unless a large quantity could be consumed.

Whence, and under what circumstances, the milk contracted this poison, it is not my part or intention to determine ; it would certainly be remarkable that so large a quantity of oxide of copper should have been dissolved in the milk, even if it had been kept in a metallic copper vessel, considering the shortness of the time and the circumstance that the milk was perfectly sweet.

CHAS. T. JACKSON.

II.

ACTION OF COLCHICUM ON THE URINE.

PROFESSOR CHELIUS, of Heidelberg, has been making a number of experiments on the urine of those who take colchicum for different complaints, and has discovered a very curious and uniform effect to result from this powerful medicine,—namely, a great increase of uric acid in the urine,—and, consequently, a great

evacuation of it from the system at large. Thus a man, who had rheumatic inflammation and swelling of the joints, was put upon the use of colchicum, his urine being first examined, and found to contain 0.069 of uric acid, free or combined with ammonia. In four days after the colchicum was commenced, and that in moderate doses, it rose from 69 to 76. On the eighth day it was 91, and on the twelfth day it was 102. In short, in the course of a fortnight, the quantity of uric acid was doubled. Experiments were made on a great number of individuals, chiefly laboring under gouty, rheumatic, and neuralgic affections, and all with the same result,—a great increase of the uric acid. Professor Chelius thinks that this operation of the colchicum may lead to some elucidation of the specific efficacy of the medicine in various diseases, and perhaps may throw some light on the nature of those diseases themselves. The Professor appears to employ the colchicum, with great success, in neuralgia of the face, in sciatica, rheumatic ophthalmia, dropsy of the joints, and in certain paralytic affections of the lower extremities connected with the arthritic diathesis. We would recommend the medical practitioners of this country to note the effects of colchicum on the urine, as the increase of uric acid may lead to the useful employment of this remedy in some diseases to which it is not now applied.—*Med. Chir. Rev.*

III.

OLD ULCERATIONS OF THE TONGUE.

M. MAGENDIE, of Paris, has published two cases of old ulcera-

tions of the tongue and pharynx, (considered by some eminent surgeons cancerous, and by others pseudo-syphilitic, and by all as incurable,) which yielded to full doses of iodine.

“The first case was that of a female of lymphatic temperament, who had enjoyed good health till the age of thirty, when menstruation became irregular, and epileptiform attacks supervened. After a time ulcers broke out on various parts of the body and the limbs: some exfoliations of the tibiae and bones of the arm also took place. Excrescences were now seen on the pharynx and tongue, and the attendant physician, conceiving the complaint to be syphilitic, notwithstanding the positive denial of the woman, she was put upon a mercurial course. Under this treatment the ulcerations of the body and limbs healed; but those of the tongue increased. In the course of time the patient lost her voice, which was attributed to ulceration of the chordæ vocales. In this deplorable condition, M. Magendie ordered a solution of the hydriodate of potash to be exhibited, and the dose to be gradually increased, till it amounted to thirty-six drops in the day. The good effects were soon conspicuous. The surface of the ulcerations cleaned, and, in fifteen days, those of the tongue were completely healed. In a little more than a month the other ulcers were also cicatrized.

“CASE II.—A female, aged forty-one years, had been in the Hospital Saint Louis four years previously for large ulcerations on the legs. She had scarcely left the hospital, apparently cured, when she was seized with difficulty of breathing, pain in the

region of the larynx, and complete loss of voice. These symptoms continued, and, at the same time, large ulcers broke out on the face and neck, as well as on the tongue. Various modes of treatment had been put in practice, but without much relief, and she entered the Infirmary of the Salpêtrière in March, 1827, three years after the commencement of the facial ulcerations. Her nose was now

almost demolished,—various fungous ulcers were spread over the face and tongue,—deglutition was very difficult,—the respiration was impeded,—articulation almost annihilated. On the 27th of June the patient was put on the use of tincture of iodine, and the dose was gradually increased. The ulcerations at last were entirely healed, and a complete cure is now effected."

SKETCHES OF PERIODICAL LITERATURE.

ARTICULATION INDEPENDENT OF A LARYNX.

THIS occurred in an individual at Toulon, in France, who several times attempted to destroy himself by cutting his throat. The consequence was the complete occlusion of the larynx, and the formation of a fistulous air passage at the place of the wound. Notwithstanding this circumstance, he was able, during the remainder of his life, which was several years, to express himself in such manner as to be distinctly understood without much difficulty.

ANALOGIES IN THE FORMATION OF THE BONES.

IN a late number of the *Bulletin des Sciences Médicales*, we find some speculations, more curious, perhaps, than useful, on the analogies which may be traced in the formation of the bones in different parts of the body. Among the parts thus compared are the scapula with the ilium, the corocoid process with the ischium, and the clavicle with the pubis. This completes the general analogy

between the shoulder and the pelvis. The arm and the thigh, also, offer many points of resemblance, as do likewise the forearm and the leg, the wrist and the instep, the hand and the foot. It appears to have been also contemplated to institute a parallel between the skull and the sacrum, the coccyx and the atlas; but the points of resemblance being unfortunately few and far between, this part of the plan is reluctantly abandoned,—a circumstance ever to be regretted by the lovers of true philosophy. In the other corresponding parts, M. Gerdy's investigations furnish him with abundant proofs of harmony of structure, as well as similarity in design; or when a decided difference occurs in place of the conformity which should have been discovered, the author finds an apology for nature's error by pleading that the end justifies the means; and that if the parts do not correspond it is merely because they happened to be made for very different purposes; and since, *exceptio probat regulam*, the diversities in question confirm rather than invalidate the

soundness of the theory. Independently, however, of this easy method of solving difficulties and reconciling contradictions, it must be confessed that M. Gerdy has illustrated his doctrine with equal fairness and ingenuity. The following is an abridged statement of his parallel between the scapula and the os ilium, and must serve our readers for a sample of the whole production.

The shoulder is formed by the scapula, which has a remarkable process, the corocoid, and the clavicle;—its counterpart, the pelvis, is formed by the ilium, the ischium, and the pubis. The scapula is flattened, the ilium is so likewise; it is hollowed inwardly, and its cavity corresponds to the viscera of the chest, but does not touch them; the ilium is concave within, and by this concavity affords a support to the abdominal viscera. The scapula has three edges connected by angles; one spinal, another cephalic, the third external or axillary. The ilium also presents three,—the first spinal, the second caudal, the third external or inguinal. The spinal edge of the scapula corresponds to the spinal column, and gives attachment to large muscles; the spinal edge of the ilium has also a relation to the spinal column, and gives attachment to large muscles. The cephalic edge of the scapula is short, sloping, and gives origin to the corocoid process; the caudal edge of the ilium is also short and sloped, and gives origin to the ischium, which corresponds to the corocoid. The spinal and cephalic edges of the scapula are separated by the superior internal angle

of that bone; the spinal and caudal edges of the ilia by their posterior spinous processes. The latter are thicker and more extended; but this disposition is in conformity with the functions of the inferior extremities, and permits the ilium to form a solid union with the trunk.

We presume, in his next paper, Mr. G. will point out the analogy existing between the structure of the *allium commune* and the geological formation of the earth; or, perhaps, the strong points of resemblance between the contents of certain human pericrania, and the machine on which the perruquier forms his *péricrânes artificiels*.

MEDICAL OFFICERS.

MUCH is said in the London journals of late on the propriety of having medical men in the office of coroner, and in the legislature. The bearing of these propositions on medical jurisprudence and anatomical science, is worthy the attention of the profession and the public. We propose to speak more at large on the latter subject at a future and more appropriate season.

ACETATE OF MORPHINE.

TETANUS and other spasmodic affections have been found to be greatly under the control of the acetate of morphine externally applied to a blistered surface. The following embrocation to the spine is recommended, and said to be efficacious in whooping cough.

R. Solut. Acet. Morph. ℥ss.
Alcohol. Dilut. ℥iss.
Camph. ʒi.
Acid Pyrolig. ℥ss. M.

BOSTON, TUESDAY, JUNE 30, 1829.

DR. NATHAN SMITH.

WE have before us an Address, delivered to the medical class of Bowdoin College, (Maine,) by the President of that flourishing Institution. It was occasioned by the decease of the celebrated Surgeon whose name, above written, is very generally known and respected in this country, and whose history is intimately connected with that of several medical schools of standing and respectability. Dr. Smith was one of those enterprising and useful men, who, impelled by the double motive of a love of distinction, and a desire of elevating the character and extending the benefits of a favorite science, regarded personal sacrifices as necessary in effecting any great object, and therefore resolved to submit to them without hesitation or murmuring. In his march to fame, he heeded not toils of body or mind; if danger was to be brooked, or great enterprises undertaken, he was found leading the way with a bold and firm spirit, which was not to be cowered by deferred hope or temporary disappointment; if local attachments or the ties of friendly intercourse were in his path, his mind rose over them, as over obstacles of a less elevated nature. In his practice as a Surgeon, he was judicious, skilful, and successful; in his intercourse with society, he was attractive in manner, entertaining and instructive in conversation, ardent and generous in his feelings; in his family, he was anxious, affectionate, and beloved.

With such a theme, President Allen undertakes not so much an eulogy as a biography,—a species of composition with which he is well known to be familiar. His introductory remarks are unhappy. We regret that he should have undertaken the difficult task of drawing a comparison between the rank of different professions. As medical men we cannot complain of the high place he has so justly assigned the Physician; but this whole subject is treated in a manner far below the estimated talents of the author: it displays, in our apprehension, neither good taste, sound sense, nor moral acumen. What he says of the statesman, for example, evinces a lower estimate of the value of laws than we should have expected from the Principal of a College which is governed by them. It is as follows:—

“The race of statesmen may be of some advantage, although it is understood by the intelligent, that their wisest measures are such as interfere the least with individual enterprise; or, in other words, that they are wisest when they make the fewest enactments,—wisest, generally, when they do nothing. All that man wants from government is protection from injury and freedom of action. The host of laws which encourage immoralities, such as lotteries and many licenses, or which confer monopolies, exclusive privileges, and unparticipated rights, and which lay shackles on industry,—and such are the greater part of human laws,—are worse than useless. Besides, a great statesman is apt to seize upon a great project, and a great project is usually full of mischief.”

Our author next goes on to examine the influence which his professional pursuits must exert on the religious character of the Physician; and this subject, which is pursued at some length, is treated with a clearness and justness of perception, an elevation of thought and sentiment, and an eloquence, which command the feelings of the reader, and set in a strong light the high moral responsibilities which rest on those whose daily occupations urge on them strong and matchless proofs of the existence, power, and wisdom of God, the certainty of death, the shortness of life, and the pervading supports afforded by the religious principle.

In the course of these remarks of President Allen, which every physician will read with benefit as well as pleasure, one opinion is advanced, we think with rather too much confidence. It is this:—"To know anything of the mind, he (the Physician) must lay aside the knife, and must think." By this declaration the learned author intends to express his entire disbelief in the doctrine of materialism; and so far as this goes it answers well its purpose. It is, however, a principle which, carried too far into intellectual philosophy, may lead to some serious errors. That reflection,—a turning of the mind in upon itself,—is necessary to a knowledge of its powers and functions, is undoubted; but that the pursuit of this knowledge is not greatly facilitated and advanced by the simultaneous use of the knife, we apprehend few philosophers at this day will venture to assert.

One reason of the uncertainty

which exists on subjects of intellectual philosophy, may be found in the very doctrine advanced by President Allen. The mind, and the brain its organ, have been studied separately. They have been considered subjects for the investigation of entirely different classes of philosophers. The mind has been the study of metaphysicians, and the brain of anatomists. We agree with Dr. A. that *anatomists* have confined their researches too much to the *structure* of the brain; for the most accurate knowledge of the structure of an organ does not alone teach us what are its functions. An anatomist might dissect the stomach or the liver till his vision and his years were expended, without suspecting the nature of the functions performed by those viscera; and the same is true with regard to the brain. But we believe that *metaphysicians* have erred as much on the other hand, by relying exclusively on their own reflections;—without regard to what they considered the peculiar province of the faculty, without once dreaming of dissections, they have endeavored to find out the laws which regulate the human understanding by an observation of their own minds. Secluded from all but their own contemplations, they have labored to search out the peculiarities of their own intellects, and then given to the world these peculiarities as the fixed doctrines of the mind.

In mental philosophy, as in every other, it must be remembered that there are no two things precisely alike; indeed, there can scarcely be found a greater variety than in the

moral and intellectual manifestations of different men. It is, therefore, just as absurd to draw general conclusions from the study of one mind, as it would be to examine minutely the size, texture, and nature, of a single tree, and declare the result to be a true description of the forest. —In order to pursue this study to advantage, we must go abroad among men; we must exercise our faculties not in the closet, but in the world; and, with a careful and extended observation of the talents, tastes, sentiments, and dispositions of different individuals, (ourselves forming but one of the many,) we must unite a minute examination of the organ which is the seat and instrument of all these various powers and functions. If we are ever to arrive at any true and certain knowledge on this noble subject, it is, we apprehend, by a course of investigation thus freed from the errors of both the anatomists and metaphysicians; it is not by laying aside the knife, but by uniting thought and observation with a careful and assiduous use of it.

Having been led into this digression by a short but expressive sentence in the address, we proceed to give a history of Dr. Smith, as we gather the incidents from his biographer.

This energetic practitioner was born, it seems, at Rehoboth, Mass., on the 30th of September, 1762. His father, who was a respectable farmer, removed soon after to Chester, Vermont. Thus reared at the very foot of the Green Mountains, our youthful genius could not but imbibe a taste for the wildness of the

mountain scenery and the free and bounding pleasures of the woods, as well as for the healthful toils of a farmer's life. It may be that he here contracted that habit of roaming which was distinguishable through his whole life; for he not only flourished, as will be shown, in different towns and States, but was as much in his element when clad in the apparel of the sportsman, as when operating with the needle or the knife.

"In the frontier forests of Vermont," says our author, "there sometimes lurked a more formidable enemy than the bear or wolf. The prowling Indian occasionally created alarm. It is well known that in the war of the Revolution the work of the tomahawk was purchased with British gold. Burgoyne, in his celebrated proclamation, held forth the terrors of the savage yell and war whoop. Dr. Smith once encountered the hardships and dangers of an expedition against the Indians, and narrowly escaped a bullet, aimed at him by a son of the forest from his place of ambush. At another time, on a hunting excursion in the winter, at a distance from home, a thaw rendered his return impracticable for several days, during which he had no food but the flesh of his game. Feeble and sick, with difficulty he regained his father's house, where he suffered an illness of several months. Such was his manner of life till he was twenty-four years of age."

The early education of Mr. S. was limited; it was sufficient, however, to entitle him to admission at the University, and it is unfortunate that he did not enjoy the advantages a University education would have given him in a profession for which he had a natural fondness. There is nothing enchanting to a general

observer, in a surgical operation ; yet it was on witnessing such a scene that Mr. Smith first discovered "an irresistible desire of becoming a student in medicine." He pursued his professional studies under the direction of the venerable Dr. Josiah Goodhue, of Putney, and, the usual term having expired, commenced the practice of Physic and Surgery at Cornish, N. H. Soon after this he resorted to Cambridge, for the purpose of attending medical and philosophical lectures at Harvard College ; and in 1790, having received the degree of Bachelor in Medicine, returned to his former residence. It was here, in the intervals of his professional occupations, that he projected a plan for a medical school, to be attached to Dartmouth College ; and having procured the approbation of President Wheelock, he again left Cornish in 1796, and embarked for Europe, with the purpose of procuring the necessary apparatus for commencing the school. Whilst abroad, his time appears to have been spent in attending the lectures of celebrated teachers ; and it was, in those days, so rare a thing for a wanderer from this western wilderness to be seen in the medical schools of Europe, that he received every attention and facility for effecting the objects of his visit. That he was well esteemed is shown by the fact, that after leaving London he was chosen member of the Medical Society of that city ; but of the visible apparatus for a school he was the means of procuring, we have only the following account :—

"From Edinburgh he sent to

Dartmouth medical books to the value of thirty pounds, which books, as he said in one of his letters, he hoped the trustees of the college would purchase, as he could ill bear the expense. At London he procured, also, as far as he deemed indispensable for commencing the proposed medical institution, an apparatus for anatomy, surgery, and chemistry."

The proposed institution was opened in 1798, and was the fourth medical School* ever established in the United States. The first lectures were given by Drs. Smith and Lyman Spaulding, and among the honors conferred that year, was the degree of Doctor of Medicine on Dr. Smith, who was also appointed sole Professor in the medical School. In this responsible station he had no coadjutor till 1810, when Dr. Cyrus Perkins, now of New-York, was appointed Professor of Anatomy.

In 1813 we find Dr. Smith taking leave of Hanover, and accepting the appointment to the Chair of the Theory and Practice of Physic and Surgery in the School then about to be opened at Yale College, where the succeeding sixteen years of his life were passed in lecturing to the medical students, in the active and extensive exercise of his duties as Physician and Surgeon, and in gathering, both as a Professor and practitioner, that enviable distinction which is now generally accorded him.

In 1821, having encouraged the authorities of Bowdoin College in their project of establishing a medical school at Brunswick, and promised to coöperate in its execution, he be-

* There are now twenty.

came the first lecturer in that school also, and delivered a course embracing all the subjects taught in the school, except Chemistry, in which branch Bowdoin College has long enjoyed the able and profound instructions of one of the ablest chemists and mineralogists of the age.*

There were but twenty-one young gentlemen who attended this first course, and the biographer attributes the rapid advances of the school, in a great degree, to the reputation, skill and experience of Dr. Smith. Of this there can be little doubt, for his reputation as a Surgeon was so great as to induce the afflicted to seek relief at his hands from different and distant parts of the State. During the first course of lectures, for example, he couched nearly twenty eyes for the cataract. One eye was completely removed; a leg was amputated; and various other surgical operations were performed by him.

After five years he relinquished his connection with Bowdoin College, and again confined the sphere of his labors to New-Haven, where he shortly after sickened, and died of a palsy on the 26th of January last, in the 67th year of his age. In his last hours he was consoled by the anxious solitudes of an affectionate family, by the kind attentions of some of his former pupils, by the retrospection of a life spent in doing good, and by the belief that "he died in the faith and hopes of the gospel."

EXTIRPATION OF THE SPLEEN.

THIS operation has been performed by one individual on twenty-seven

* Professor Cleveland, author of an elementary work on Mineralogy.

living animals; and to judge from the meagre results which have been obtained, the cause of science has certainly been little benefited by the time and labor bestowed on them: we might say the same of the cause of humanity, did not the word sound strangely to us in such connection.

We gave, last week, some experiments on living animals, which, in their results, and some striking traits of character, are not very dissimilar to those here alluded to; we regret to add, however, that these last were no fiction;—they were really performed, and the results have been as follows:—Death ensued in one instance, and in this animal another operation had previously been performed. In the rest, after the wounds were healed, it was not remarked that the functions were greatly deranged. The stomach continued to digest food, but when the animals had eaten too much or too fast, vomiting ensued with great facility,—a circumstance which was probably owing to the local irritation of the diaphragm from the wound. The bile was secreted, but in rather less quantity than usual, and lymph drawn from the thoracic duct presented the usual properties. If the operation is performed on young animals, it does not interfere with their subsequent growth, and nutrition seems to go on with the same rapidity as ever. The only function which appears to suffer from the removal of the spleen is that of procreation. In those in which this faculty has not yet appeared it develops itself more slowly, and where it already exists is considerably impaired.

Dogs in whom the operation has

been performed, seem to acquire increased speed in running.

CURE DES RAISINS.

A CURIOUS mode of treating dyspeptic complaints, induced by high living, irregularity in diet, &c., is adopted at Frankfort, in Germany. It consists in sending the patient into the country during the vintage season, to live on fresh grapes. Lodgings are engaged in favorable situations, with the understanding that the individual is to be furnished with about three pounds of grapes daily. These are taken from the vines at three meals; the second one, or dinner, to be at 1 o'clock. No other article of diet is permitted except a little bread. While under this treatment the patient rises early, and goes to bed at 8 or 9 o'clock in the evening; and the cure is usually completed in about a month.

TANNIN IN UTERINE HEMORRHAGE.

THERE are few practitioners who have not felt the want of some more certain means than we possess, of arresting uterine hemorrhage or protracted menorrhœa. It is therefore worthy of notice that *tannin* has been found particularly efficacious in such cases. Five instances are related by Dr. Porta in an Italian journal, (*Annali Universali di Medicini*), in which it proved curative in a few days, after other remedies had failed.

Dr. Porta states that these are only a few of the numerous cases in which he has employed the tannin with success; and, during three years, he has only met with two cases in which it failed. From the repeated opportunities he has had of observing its action, Dr. P. has drawn the following corollaries:—

1st. That this medicine acts in a particular manner upon the uterus, when that organ is the seat of an irritation which gives rise to hemorrhage, and when this bleeding results from chronic metritis.

2dly. In hemorrhage arising from acute metritis, it is necessary first to combat the inflammation by repeated sanguineous evacuations, and then to have recourse to the tannin.

3dly. It has no beneficial effect in those hemorrhages which are the result of organic alteration of the uterus.

4thly. This remedy ought to be preferred to all others in the treatment of uterine hemorrhage, not only on account of the promptitude with which it causes the symptoms to disappear, but because the dose necessary for this purpose is so small as not to disagree with the stomach even of debilitated and irritable persons. The dose is about two grs.

Disease of the Heart caused by Onanism.—Dr. Krimer, of Aach, has lately published an interesting paper on this subject. Our own experience has furnished us with several opportunities of seeing cases of the kind he describes; and, as the subject has not hitherto been particularly discussed, we shall give the leading points of his communication.

Dr. K. is of opinion that diseases of the heart, which have increased so much within the last twenty years, do not always depend upon organic alteration, but are very frequently produced by the baneful and lamentably frequent practice of the vice of onanism. Headachs, great anxiety, palpitations, faintness, an oppression and unusual sensibility in the epigastric region, are the first symptoms produced. They increase in severity in proportion as the subject gives way to the gratification of his unnatural propensity, and quickly diminish, or cease altogether, if he abandons it. To support his opinions,

Dr. K. states many cases. He enumerates the following symptoms as pathognomic of such affections of the heart; by an attention to which, the practitioner will be enabled to distinguish the train of symptoms from other diseases which are not unfrequently suspected.

1. The hair loses its natural brilliancy, is remarkably dry, and frequently splits at the extremities. It falls off easily and in large quantities, especially from the fore part of the head. In persons affected with consumption, or organic disease of the heart, the hairs appear well nourished, and rarely fall off.

2. The eyes are dull, downcast, frequently full of tears, without expression, and deeply sunken in their orbits. The edges of the eyelids are reddish, and surrounded by a bluish tint. In phthisical patients, and those with organic disease of the heart, the eyes are brilliant, and always preserve their natural expression and vivacity. In young females, at the approach of menstruation, a blue circle is commonly observed around the eyes, but here also their brilliancy is undiminished.

3. The patient appears very timid, and unwilling to look other people in the face.

4. Periodical headach is common, extending from the occiput towards the forehead.

5. The power of sight is diminished, the appetite is lost, and the tongue is usually loaded. A slight cough, short and difficult respiration, are generally present; but still the patient can draw a deep inspiration.

6. Pains in the stomach, with weight and pressure in the epigastric region. Patients with organic diseases of the heart have occasionally these symptoms, but in such cases they are not accompanied by those above enumerated.

7. A general feeling of lassitude and feebleness of the limbs, with pains in the lower part of the back. We would add, also, that pain and

throbbing of the testicles, with uneasy sensations shooting up the spermatic cord, are frequently complained of.

8. The perspiration has a dull and sweetish odor, similar to that of infants at the breast.

9. If the vice of onanism be touched upon in conversation, the agitation and embarrassment of the patient invariably betray him.

10. If the practice be continued, the mind is at length enfeebled, the patient is incapable of mental or bodily exertion, and sinks into a state of somnolency.—*Hufe. Journ.*

Intestinal Worms expelled by Means of Croton Oil.—M. Balby has found the croton oil efficacious in cases of invermication; one of these is as follows:—

—Ginet, aged 24, admitted into La Pitié last March, brought with him a bottle, containing a long piece of the *Tænia vulgaris*, which had been expelled, after much suffering, by means of the pomegranate. He still complained of oppression and uneasiness in the ileo-cæcal region, which he attributed to the remains of the worm. The day after his admission one drop of croton oil was administered, which was followed by seven or eight motions, bringing with them several yards of tape-worm. After a respite of three or four days, another dose was administered, which brought away about two yards more. The portion obtained this time was not so broad, and evidently one of the extremities, in which, however, the characters of the head could not be perceived.

On the 30th of March two drops were given. This was followed by ten motions, with a quantity of the debris of the *Tænia*, and a large female lumbricus. Since this time Ginet has experienced no inconvenience.—*Med. Gaz.*

Cartilaginous Bodies within the Knee-joint.—On the 8th of Decem-

ber Mr. Cowan extracted two cartilaginous bodies from the knee-joint of a stout healthy-looking young man, a farm servant. They gave great pain, and much impeded the motions of the joint. The one was about the size of a field bean, the other somewhat smaller. They were cartilaginous externally, but on a section being made, the central part appeared entirely ossified. He had two similar bodies extracted six months previously, and immediately afterwards observed the present two. Knew of no cause. When he left the hospital, a small, hard, immovable tumor, painful on firm pressure, was observed at the upper part of the same joint,—probably a body similar to those extracted, but adherent to the synovial membrane. The incision healed easily by the first intention.—*Id.*

Egyptian Surgery.—A medical school of considerable promise has been established in Egypt, and it seems that surgery especially flourishes at Abouzabel. The principal surgeon, M. Clot, has tied the external iliac, and performed amputation of the arm at the shoulder-joint, and of the lower limb at the hip: the two former cases had proved extremely successful, and the third was doing well at the end of nine days, when the account is dated. Fifty capital operations are said to have been performed, all with success: among them were twenty-two cases of lithotomy, and not one of the patients died, notwithstanding that M. Clot has tried all the different methods of performing the operation which have ever been described!—*Id.*

Borax in Cutaneous Diseases.—Dr. Reinhart states that he has used a solution of borax (3ss. to an ounce of water) with great success, as a local application, in various chronic cutaneous diseases. Pieces of linen are to be dipped in the solution, and applied to the part. A slight sense

of heat, and some redness of skin, result: if these be considerable, the application is to be intermitted for a few days.—*Jour. der prakt. Heilk.*

Lithonriptor.—Recent excavations made at Pompeii have stripped our times of the honor of, this invention, for in opening the dwelling of a surgeon, among the ruins of that overwhelmed city, the identical dilator and extractor here alluded to, was found among a variety of other instruments with which that dwelling abounded. The Pompeian extractor is made of bronze.—*Weekly Rev.*

Curious Hybrid.—There is now at Berlin an animal produced between a stag and a mare. The appearance of the creature is remarkable: the fore part is that of a horse, and the hind part that of a stag, but all the feet are like those of the latter animal. The king has purchased this hybrid, and sent it to the menagerie at Potsdam.—*Lond. Med. & Phys.*

Method of preventing the evaporation of Spirits.—A mode of preventing evaporation very applicable to anatomical preparations is simply to cover the surface with a stratum of oil of almonds.—*Lond. Med. Gaz.*

NOTICES.

A Communication from Dr. Warren, of Wardsborough, is received, and will be published in an early number.

The reader will please turn to p. 269 and erase the word *pint* in the note at the bottom of the page, and write *quart* in its place. On page 300, Syfred should be Lyford.

REPORT OF DEATHS IN BOSTON,

The week ending June 19, at noon.

Of accident, 1—consumption, 2—convulsions, 1—croup, 1—cramp in the stomach, 1—infantile, 1—lung fever, 1—measles, 1—old age, 2—teething, 1—unknown, 1. Males, 8—females, 5. Stillborn, 2. Total, 15.

ADVERTISEMENTS.

CARTER & HENDEE

HAVE just received LIZAR'S ANATOMICAL PLATES, in 12 Nos., cold and letter press.

Barton's North American Flora, 3 vols.

do. Medical Botany, 2 vols.

Bonaparte's Ornithology, 3 vols.

A System of Human Anatomy; translated from the 4th Edition of the French of H. Cloquet, M.D. By ROBERT KNOX, M.D. F.R.S.E.

TURNER'S CHEMISTRY,—NEW EDITION.

JUST published, and for sale, by CARTER & HENDEE,—Elements of Chemistry, including recent Discoveries and Doctrines of the Science. By EDWARD TURNER, M.D. F.R.S.E. Second American Edition.

MANUEL FOR THE USE OF THE STETHESCOPE.

CAARTER & HENDEE have recently published,—A short Treatise on the different Methods of investigating Diseases of the Chest. Translated from the French of M. Collins, by W. N. RYLAND, M.D. From the third London Edition, with Plates, and an Explanatory Introduction, by a Fellow of the Massachusetts Medical Society.

In preparing for the American press the English translation of the well known and highly useful work of M. Collins, which translation has passed through three editions in England, the Editor thinks he can render it more acceptable by dispensing with the various prefaces and introductory remarks which encumber the last edition, and by substituting in their place an entirely new introduction, which is intended to embrace the amount of all that is important in the prefaces alluded to, as well as that which is contained in various abstracts and reviews which have appeared of treatises upon the different methods of investigating thoracic diseases, and in some other works which are not generally before the profession in this country.

C. & H. keep constantly for sale Stethoscopes of the most approved form.

FRENCH WATER COLORS.

COTTONS & BARNARD, 184 Washington Street, have for sale, the following Water Colors, of an excellent quality, manufactured by P. C. Lamberlye, (France), viz: Bistre, Raw Cassel, Burnt Umber, Raw Umber, Egyptian Brown, Vandyke Brown, Brown Pink, Seppia, Violet Lake, Carmine Lake, Sanders Blue, Prussian Blue, Mineral Blue, Indigo, Yellow Ochre, Yellow Mineral, Gamboge, Yellow Orpiment, Yellow Lake, Naples Yellow, Burnt Italian Earth, Burnt Sienna, Raw Sienna, Italian Earth, Crocus Martial, Green Lake, Sanders Green, Sap Green, Mineral Green, Prussian Green, Vermillion, Saturnine Red, Indian Red, Red Ochre, Red Orpiment, Flake White.

Also—a great variety of Newman's, Ackerman's, Reeves's and Osborne's Colors, in boxes and separate cakes.

DENTAL SURGERY.

THIS day received by CARTER & HENDEE, No. 135, Washington Street,—A SYSTEM OF DENTAL SURGERY. In three parts.

1. Dental Surgery as a Science.

2. Operative Dental Surgery.

3. Pharmacy connected with Dental Surgery.

By SAMUEL SHELDON FITCH, M.D., Surgeon Dentist. Denticum curam habeto ut bene digeras et diu vivas; laxatis dentibus laxantur et chylaceos officinae; hinc mille malorum occasiones.—Baglivi XIII.

March 17.

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LONDON STATIONARY, &c.

JUST received by COTTONS & BARNARD, 184 Washington Street, Crown and Double Crown Tissue Paper, large thin Bath Letter Paper; Billet Paper, Demy and Royal Bristol Board, do. do. London Board, Newman's Carmine, Music Paper.

A COPY of Bloomfield's Critical Digest of Sacred Annotation on the Gospels, 3 vols. 8vo. "The most learned Commentary in the English language." For sale by COTTONS & BARNARD, 184 Washington Street.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

Communicated for the Medical and Surgical Journal.

ANOMALOUS ERUPTION.

History of a very rare and anomalous Eruption which appears to be connected with important Changes in the System.

By CHANDLER ROBBINS, M.D.

IN his excellent treatise on Cholera Infantum, Dr. Dewees enumerates among the symptoms which mark a fatal issue of the disease, an eruption of a very peculiar character. His words are these:—

“As death approaches, a gradual aggravation of symptoms takes place; and there is one, which, as far as we have observed, has always proved fatal: it is a crystal-line eruption upon the chest, of an immensity of watery vesicles, of a very minute size. The best idea we can convey of the appearance of this eruption, is to imagine a vast collection of vesicles, apparently produced by flitting an equal number of very minute drops or particles of boiling water, and each particle producing its vesicle. We first pointed out this appearance to our friend Dr. Physick, in the year 1794, in the disease now under consideration; and subsequently, under like circumstances, to Dr. Rush; both of whom acknowledged the eruption new to them.

“This symptom may readily escape observation, if not looked for; it requires that the surface on which it has spread itself should be placed between the eye and the light, and viewed nearly horizontally.”

The eruption thus minutely described by Dr. Dewees, and not, I believe, by any other author, I have seen once. It was in every particular precisely the same, but occurred under circumstances so different, that a record of the case may be useful in warning us not to be too precipitate in founding our prognosis on this single symptom.

On the 17th of August, 1821, I was called to S. C., a little girl 4 years of age. She was laboring under symptoms of decided Hydrocephalus, in its second stage. She sat in a chair as I entered the room, moving her head and body backward and forward slowly but constantly, and continued to do this during the whole of my visit. I learnt that for the last day or two she had done the same thing, without ceasing, from morning till night, and manifested great unwillingness to move or be moved from her position, to speak, eat or drink. Her bowels were costive, countenance pallid, and pupils permanently dilated. It was a case, in fact, which bore itself more distinctly from a case of worms, than any

one of the same disease I have ever seen.

This little girl was several weeks under treatment, but grew slowly worse, until at last she was unable to move herself in bed. Not able to construct any further plan of treatment which could promise any good, I requested a consultation, the result of which was a perfect agreement as to the hydrocephalic nature of the case, and a decided opinion that she was no longer a subject for medical treatment.

In this state the case was left, and no alteration for better or worse was discernible in the patient for several weeks. At length, I received a message from Mrs. C. that her daughter had spoken, and a request that I would call and see her. She replied to several questions, and the eye looked less lifeless than when last visited. On examination, I found the whole chest covered thickly with an eruption, most accurately described in the foregoing extract from Dr. Dewees. It was first discovered by the touch, and on admitting a strong light, the chest had such an appearance as would be given it if hundreds of pearls, about half the size of a pin's head, had been cut in halves and placed thickly on the skin; no redness or soreness was distinguishable. This eruption, to me so novel, continued to spread till the neck, shoulders and arms were entirely covered with it; and the symptoms of the disease gradually abated from the morning of its appearance.

This girl I saw, about six years afterwards, as strong and healthy a child as any we meet.

Remarks.

In this history I have not enumerated the symptoms, nor detail-

ed the modes of treatment, for the former were so decided as to leave no doubt of the character of the disease, and the latter so varied and unsuccessful, as to be of little interest or importance. Nature effected the cure. What agency the eruption had in promoting this cure, and how this agency was exerted, are points which, after much reflection, are yet to me exceedingly indefinite.

Very little attention appears to have been given to the precise modes in which natural cures are effected. The only attempt at a classification of these modes has been made very recently by Mr. Mackenzie, of Glasgow, who divides the processes of what we may call Nature's Therapeutics, into five classes.*

The first class of means employed by Nature to remove disease, act with such rapidity as to elude our notice of their *modus operandi*,—we cannot detect the processes by which the cure is effected. Thus pain ceases, spasm is relaxed, and so on. This, therefore, is regarded by Mr. M. as the cure by "cessation."

The second mode is by "revolution of functions." This is illustrated in measles, vaccinia, and in intoxication. The alcohol first stimulates the circulation, stupor succeeds, and then comes on free excretions by the kidneys, lungs, and skin, by which the alcohol is eliminated, and the system relieved from its stimulus.

The next method is effected by the "revolutions of time," as illustrated by periodical occurrences in the system.

The fourth class is denominated "natural surgery," as in the union

* A sketch of Dr. Mackenzie's views was presented in this Journal, No. 13, vol. 2.—Ed.

of wounds by the first intention, the restoration of parts by granulation, and the removal of injurious substances by suppuration or absorption.

The last method enumerated, is "the conversion of one disease into another" which is more easily or speedily relieved,—as the conversion of dropsy into diarrhoea, head-ach into hemorrhage, &c.

In this last class, (which is, perhaps, the one illustrated in the case I have related,) Nature has already been imitated with infinite advantage. How far a closer observation, a clearer division, and a more systematic study of Natural Therapeutics, might aid the profession in the good work we have undertaken, is a promising subject for reflection and inquiry.

II.

Abridged from the *Edin. Med. and Surg. Jour.*

DISFIGURING THE COUNTENANCE WITH SULPHURIC ACID.

By R. CHRISTISON, M.D. F.R.S.E. &c.

THE disfiguring or maiming the countenance by the throwing of corrosive liquids over it, is a crime of recent origin in this country. It appears to have been first practised in the manufacturing districts during the disputes which took place a few years ago between workmen and masters regarding the rate of wages; at least, it was first heard of in Scotland under these circumstances. Several deplorable instances having occurred at Glasgow of this malignant and cowardly mode of gratifying revenge, the present Lord Advocate, in applying for a bill to extend to Scotland the Ellenborough act against wounding and maiming, also introduced a clause which classed

with such crimes the offence in question, and awarded for it the punishment of death.

In Glasgow, since the passing of this act, no instance has occurred of the crime against which it is directed. But besides the case I am about to relate, which happened at Edinburgh, it appears from the London newspapers for October and November last, to have been twice committed during these months in the metropolis; once out of revenge, and again by a shoplifter for the purpose of blinding the shopman and preventing pursuit. It is a crime, indeed, which, now that its existence is generally known, I fear the authorities may often have to deal with; for it presents several peculiar temptations to the unprincipled and revengeful to commit it. There can be but one opinion as to its enormity and the fitness of the punishment which will now await it in this part of the kingdom.

Hugh Macmillan, and his wife, Euphemia Lawson, were indicted under the statute alluded to, on the 17th of December, 1827, for maiming, disfiguring and disabling Archibald Campbell, by throwing sulphuric acid over him on the 17th of the previous October. The indictment likewise contained a separate charge of murder against them; but for reasons to be mentioned presently, this charge was afterwards departed from by the public prosecutor.

The facts of the general evidence by which the crime was brought home to the female prisoner, were the following:—The Macmillans, who lived in the same stair with Campbell, had long been on bad terms with him; and a few days before he met with the accident the woman was bound over to

keep the peace towards him ; on account of which both she and her husband had been repeatedly heard to vow vengeance in the most malignant language. The female prisoner was proved to have obtained, shortly before the commission of the crime, information concerning the corrosive properties of sulphuric acid ; and in consequence hinted that she would some night try its effects on Campbell's cloak after her husband was asleep. Early on the evening of the 17th of October, she was seen to carry out and return with a particular jug, which she placed under her bed, cautioning her children not to meddle with it. Towards midnight, Campbell, on his way up stairs to his lodgings, had approached Macmillan's door, when, the door opening a little, he observed a female arm thrust out, holding something white ; and, under the impression that some mischief was intended him, he was in the act of turning round to retreat down stairs, when a liquid was thrown over him, which, by the intense burning pain it caused, he at once suspected to be oil of vitriol. The alarm being instantly given, the police in a few minutes entered Macmillan's room, where the woman was found dressed, and her husband only dressing himself, as if just raised out of bed. No trace of sulphuric acid could be discovered in the room. But between the alarm in the stair and the arrival of the police, a person who lived in the floor under the Macmillans heard their window open, and something immediately break on the pavement below. Accordingly, in the *close** under the

window were found the fragments of a jug like that which the woman had been seen carrying early in the evening ; and these fragments had a sour taste and smarted the tongue. A large quantity of sour tasted liquid was also found on the stair and wall between Macmillan's door and the spot where Campbell stood at the moment of receiving the injury. By a complete chain of circumstances, therefore, though not by any direct proof, the act of throwing the deleterious liquid was traced to Macmillan's wife.

Campbell was without delay transported to the Infirmary, where he arrived about two in the morning. His state at this time, and the progress of the symptoms till his death, twelve days afterwards, were described by Dr. Hunter, the surgeon, and Dr. Nesbitt, the surgeon's clerk of the hospital, in a report which was libelled on in the indictment, and from which chiefly the following particulars have been derived:—The skin on the left side of the face was partially removed, and the whole presented at first a white disorganized appearance. The eyelids of both eyes were much inflamed and swollen, and the left eyeball was also severely involved in the mischief, but the right eyeball was uninjured. The skin of the inside of the lips was

Edinburgh are from five to ten stories high. Narrow passages, from three to ten feet wide, lead from one street into another, or form courts or cul-de-sacs ; from these passages, which are generally very filthy, doors open occasionally on the lower step of a narrow staircase, which winds up almost perpendicularly to the top, and from this staircase other doors open on each story into the apartments of the poor. These passages and cul-de-sacs are called in Edinburgh *closes*.—Ed.

* The buildings in the old town of

also white and swollen, and on the back of the left hand, as well as between the fingers, there were white excoriated streaks. In the course of sixteen hours the white marks turned brown. The pain of the face and eyes, which was at first excruciating, became easier under the use of suitable applications. But as at the time of the visit, about twelve hours after the accident, the pain of the left eye, extending to the head, evidently threatened a severe ophthalmia, he was bled from the arm; and next day the operation was repeated. From these measures he derived great relief. The inflammation and disorganization of the eye, however, went on increasing, and soon ended in the bursting of the cornea and discharge of the aqueous humor and crystalline lens. Towards the close of the fifth day, namely, on the evening of the 22d, while apparently doing well, he had a shivering fit, and next morning complained of acute pain at the bend of the right arm, where he had been bled. Inflammation immediately sprung up around the orifice, general swelling of the arm came on, and progressively increased for the three following days. Severe febrile symptoms ensued, and afterwards also difficult breathing, with other signs of pulmonary inflammation. Under these complicated disorders he gradually sunk, and died on the morning of the 30th of October. The report concluded with ascribing his death to the inflammation of the arm and concomitant fever.

The body was examined on the following day by Dr. Hunter and the late Dr. Cullen, whose report of the appearances is here given in detail.

"On Saturday, the 31st of October, we inspected the body of Archibald Campbell, who died in the Royal Infirmary on the morning of the 30th.

"The right arm was carefully examined and anatomized. We found the vein from which he had been bled very highly inflamed at the wounded part at the bend of the arm. From this point the inflammation had extended upwards to the great vein of the arm and shoulder, and downwards to the small veins of the forearm. These vessels were almost filled with purulent matter, and partly obliterated. The great veins at the upper part of the chest were natural.

"There was a small quantity of serum in the cavity of the membrane which invests the heart, but that organ was itself sound.

"The membrane which covers the lungs and ribs, called the pleura, was inflamed, and covered at the back part with the usual product of inflammation. Seropurulent fluid was found in both cavities of the pleura. Both lungs, when cut into, were found very highly inflamed, and particularly in the upper and lower lobes." [I may here add in explanation, that both lungs were most extensively consolidated by serous effusion, red hepatization, and diffuse tubercles, intimately intermingled; and that the last morbid deposition was distributed in irregular masses, some of them of the size of a pigeon's egg, so as to occupy not less than a third part of the entire volume of the lungs.]

"The left eye had its anterior part entirely destroyed. Some of the humors, [the aqueous humor and crystalline lens,] had es-

caped, and the whole organ was disorganized, and absolutely incapable of recovery.

"Water was found in considerable quantity on the surface, in the cavities, and at the base of the brain. That organ itself was natural. No other morbid appearance was anywhere observed.

"Upon the whole, we are of opinion that Archibald Campbell died of inflammation of the veins of the right arm, and of inflammation of the lungs, the former caused, according to the best of our judgment, by the wound of the vein in bleeding." *Signed, &c.*

To complete the medico-legal investigations in the case, it only remains to mention that the chemical analysis of various articles of the man Campbell's dress was undertaken, at the request of the authorities, by Dr. Turner, now professor in the London University, and myself. The nature of the corroding fluid employed by the prisoner, might perhaps have been presumed from the foregoing particulars of the evidence; but the public prosecutor considered it right not to leave any part of so novel a case without throwing all the light possible on it.

The result of this analysis was, that the fluid used was sulphuric acid; and a short report was accordingly drawn up to that effect.

I need hardly add that the female prisoner, Euphemia Lawson, was found guilty, her husband not guilty. She was consequently condemned to be executed; but as it was the first condemnation under a new statute, her sentence was afterwards commuted for perpetual banishment.

III.

CASE OF SINGULAR TUMOR, &c.

Case of singular Tumor in the Jejunum, preceded by Symptoms resembling Colic.

By E. A. LEONARD, M.D., of Albany.
Communicated by A. H. STEVENS, M.D., Professor of Surgery, &c., for the N. Y. Med. and Phys. Jour.

I WAS called, on the 23d of November, 1828, to Mrs. H., aged 40 years, of good constitution, but whose health for the last few months has been declining. Found her laboring under the usual symptoms of colic; bowels constipated, which she attributes to the use of opium in a recent similar attack; no tension or tenderness in any part of the abdomen. She had a full dose of opium, followed by calomel and other purgatives, by which she was so much relieved on the 27th, that I did not again see her till the 11th of December. During the interval she had repeated alvine evacuations, but on the morning of the day last mentioned, was attacked again with pain in the bowels, which was severe, and not confined to any one portion of the abdomen, but passing up and across from the right iliac to the left hypochondriac region, in the course of the colon. This attack was attended, like the preceding one, by vomiting soon after anything was received into the stomach; she was again ordered an anodyne, succeeded by repeated doses of croton oil, castor oil, calomel, and other purgatives, some of which were retained, and others almost immediately rejected. Five days after taking the calomel, her mouth became excessively sore; this was relieved by

a gargle containing pyroligneous acid. Fomentations were applied, and enemata of various kinds, stimulating, anodyne, &c., administered, and tepid water was also thrown up in large quantities. None of the means made use of produced any decided effect. On the 23d she vomited a considerable quantity of fluid, in which the smell of assafœtida was strongly manifest; a portion of the tincture of that substance had been given in injection on the morning of that day. At this time, very careful examination discovered a small space in the left hypochondriac region, somewhat tender upon pressure; this was quite limited, not more than two inches in diameter. On the 24th the change was exceedingly great, the pain had almost entirely abated, and the pulse, which previously at all times had been nearly natural, had now become extremely weak, and scarcely to be enumerated; there was also delirium. Ordered tinct. quinine and wine ad libitum; she continued to grow worse, but did not

expire until the 27th at evening. —Dissection at 2, P. M., 28th. —Body much emaciated; parietes of the abdomen very thin; vessels of the omentum slightly injected; large intestines sound in every part; some old adhesions, but no marks of recent peritoneal inflammation: on examining the smaller intestines, the inferior portion of the jejunum was found highly inflamed, and on exposing its cavity, a firm, fleshy, or semicartilaginous tumor was discovered, arising from the muscular and covered by the mucous coat, entirely filling it, and even putting its coats very much on the stretch; being in length about two and a half inches. Below the tumor the gut is slightly inflamed and somewhat thickened, but above it the preparation is beautiful, showing the different results from mere irritation to that excessive inflammation, terminating in death of the part. The whole diseased portion of the gut is, in length, about twelve inches. The other viscera of the abdomen were in their natural condition.

SKETCHES OF PERIODICAL LITERATURE.

EXPULSION OF TAPE-WORMS.

DR. SCHMIDT, of Berlin, has lately sold to the Prussian government, for the sum of 200 rix dollars per annum, a new and certain mode of curing tape-worm, —the effects of which had been previously exhibited to the satisfaction of a committee appointed to investigate the subject. The following is the prescription with which Dr. S. commences his operations:—

R. Rad. Valerian, 3vi.
Fol. Sennæ, 3ij. M. et infus. in
Aq. Bull. 3vj. Adde
*Natr. Sulphur. Crystal, 3ij.
Syr. Mannæ, 3ij.
†Elixosacch. Tanaceti, 3ij. M.

Of this mixture, two tablespoonfuls are to be taken in the morning fasting, and repeated every two hours.

* We take this to mean the Sulphate of Soda.

† A saccharine preparation of the Oil of Tansy, not introduced in our pharmacopœias.

In the mean time, the patient drinks freely of coffee well sweetened with sugar, in order to deprive the worm of its mucous envelop, and to chase it to the lower part of the canal. The mixture is continued until 7 in the evening. At noon the patient takes a "potage clair à la farine," and a few morsels of herring with the roe; at 8, P. M., a salad of herrings hashed up with ham, an onion, and plenty of oil and sugar. The above treatment always causes, during the first day, the expulsion of numerous fragments of the worm, and in some instances has expelled the whole. At 6 the next morning, Dr. S. commences the use of the following pills:—

R. Assafoetid.
 Extr. Gramin. aa ʒiij.
 *Pulv. Guttæ,
 " Rad. Rhei,
 " " Jalap. aa ʒij.
 " " Ipecac.
 " Fol. Dig. Purp.
 †Sulph. Stib. Aurant. aa ʒss.
 Subm. Hyd. ʒij.
 Olei Tanacet. Æth.
 " Anisi Æth. aa gtt. xv. M. fiant
 pil. pond. gr. ij.

Six of these are to be taken hourly, with a tablespoonful of castor oil during the first interval, and coffee well sweetened in the following ones. This is continued till the worm is expelled, which usually happens by two o'clock in the afternoon. If the expulsion takes place very slowly, the oil may be repeated at other intervals after the first. At noon the patient takes only broth, and at evening "un potage au pain ou à la

farine," with fresh butter and sugar. To prevent relapse, there is subsequently ordered, from time to time, a salad of herrings, with horseradish, vinegar and sugar; and a few doses of the pills may be taken every week. After the treatment, the patient is directed to adopt a diet of good soup, chickens, pigeons, &c., and to take daily a few doses of some bitter medicine.

If the presence of tænia is suspected merely without being proved, the patient takes in the evening a salad of herrings, which is followed by a copious draught of sweetened water; and the next morning fasting the following powder:—

R. Pulv. Rad. Jalap. gr. xv.
 " *Sem. Cinæ, ʒss.
 " Guttæ,
 Hyd. Mur. Mit. aa gr. vi.
 Elæosac. tanac. ʒi. M.

This powder is followed by coffee taken as above, or by rich soup. These means produce abundant stools, in which are found fragments of the worm, if any exist, and sometimes the worm entire. If, however, the existence of this is ascertained, recourse is had to the treatment above mentioned, with a view to its complete removal.

This treatment is contraindicated in pregnancy, at the menstrual periods, in phthisis, hemorrhoids, and extreme debility from old age or other causes. Of 166 persons treated by Dr. Schmidt, only 15 were men. The cases of a single worm amounted to twenty; while in the others

* The whole officinal title of this article is Pulv. Resin. Gambog. Guttæ. It is a drastic purgative.

† Perhaps the Sulphuret. Antimon.

* This article is introduced into the Pharmacop. Lond. as Semin. Santonici, but not considered as entitled to much confidence.

the number varied from two to nine. The largest number in any one case was *seventeen*. These occurred in a female 18 years of age, and were of considerable size.

CONSEQUENCES OF A FALL,

Or a Specimen of German Physiology.

A GERMAN doctor tells a story of himself, which, if not intended for a hoax, is a very curious one. By a fall on the floor from a small height, he bruised the great trochanter of the right side. There was neither fracture nor luxation, yet, after seven months had elapsed, he was still able to walk only by the aid of crutches. Immediately after the fall, he experienced a marked aversion for many articles of diet of which he was previously very fond, such as sugar, milk, and wine; while others, which he had before disliked, became at once agreeable,—as beer and vegetable acids. The fall was also followed by obstinate constipation. The author attributes these phenomena to a concussion of the spinal marrow, which might have resulted from the fall.

IMPERFECT VISION.

An Account of two Cases of Insensibility of the Eye to certain of the Rays of Color. By HUGH COLQUHOUN, M.D.

IN the first of these, the individual was incapable of distinguishing between red and a certain shade of green, while other shades of the latter color were easily recognized. By candle light all yellows appeared white; crimson had the appearance

of scarlet; pale green of blue; orange of a dirty red. In the second case, the vision was equally inaccurate, and this inaccuracy extended itself to nearly all the varieties of color. When these were removed to a considerable distance, the power of discrimination seemed to cease entirely, except so far as the individual was able to feel that they belonged to yellow among the light, or to blue among the dark colors. Persons were not easily recognized by their features, though readily known on speaking. In neither of these cases was the disease hereditary.

COLICA PICTONUM.

EIGHT cases of this disease are reported by M. Jacobi, physician to a white lead manufactory at Strasburg, who appears to have paid particular attention to its symptoms and treatment. In the *first* of these cases, castor oil and purgative clysters having been employed to no purpose, tartar emetic was prescribed in conjunction with cream of tartar, so as to produce free vomiting, which was followed by purging. In the *second* case, the treatment consisted in the exhibition of calomel and opium,—ten grains of the former to one of the latter every two hours. This produced some evacuations after the third dose. The *third* was cured in like manner. In the *fourth*, croton oil was given,—first one and then two drops,—but without active purging. A clyster, containing two drops of the oil, was then given, which brought away some scybalæ. Next day the croton was again given, with the addition of opium; and this, as-

sisted by clysters, speedily produced evacuations. A return of the colic made it necessary to repeat the clysters on the following day; after which, permanent relief followed. In the *fifth* case, calomel and opium were given as above, but did not affect the bowels till after the seventh dose, that is, when seventy-two grains of the former had been taken, and seven of the latter. Some evacuations then followed; but the symptoms returning next day, the same treatment was adopted, and carried again to the same extent. Some ptyalism followed, but disappeared again in a few days, and he had no more colic. In the *sixth* case, two grains of opium were given daily, with purgative clysters. An anodyne plaster was also employed, but with what effect on the symptoms is not stated. The *seventh* case was complicated with incomplete paraly-

sis. After the colic had been removed by calomel and opium, the weakness of the limbs was treated by tepid bath and purgatives, and disappeared in twelve days. The *eighth* was a case of neuralgia, producing acute pain, which extended from the sacrum to the foot, following the peroneal edge of the leg. Calomel and opium were ordered as above, and the neuralgia ceased on the second day.

In all the above cases, constipation of several days continuance had preceded the colic. The facts stated seem to warrant a conclusion in favor of combining opium with cathartics in the treatment of this disease. The circumstance mentioned in connection with the sixth case, of 144 grains of calomel taken in the course of two days, and followed only by slight ptyalism, is not a little remarkable.

BOSTON, TUESDAY, JULY 14, 1829.

EPIDEMIC ECZEMA.

An eczematous eruption is now extremely prevalent in this city and vicinity. It made its first appearance during the past summer, when it yielded to remedies with tolerable readiness. As the cool weather advanced it became gradually more rare, and almost escaped notice in the winter. For the last four months it has reappeared with increased violence, and affects equally persons of every age and of every class. Cleanliness and good living are assailed as often as poverty and personal neglect; nor do external agents of any

description appear to have much effect in promoting or removing the disease.

The eruption generally appears in the form of small pimples surrounded by an inflamed base, and without any previous derangement of the system. The itching is so intense as entirely to deprive the patient of the command of his hands, and scratching does not appear to be productive of that satisfaction which it gives in ordinary cases; on the other hand, it is followed by a sense of smarting scarcely less disagreeable than the previous formation. Many

persons afflicted with this epidemic are obliged by it to pass night after night in walking their chambers, and in other fruitless endeavors to alleviate the cutaneous irritation.

When the heads of the pimples are abraded, a thin dark-colored scab is formed, which is closely attached to the skin, and removed by very slow degrees, leaving a slight discoloration that disappears in a few weeks or months, according to the violence of the disease. This eruption is seen in various stages in the same individual at the same time,—new vesicles coming out as former ones disappear. The general health is not usually affected; the *primæ viæ* are not deranged; and were it not for the terrible and uncontrollable itching which torments the patient at all hours, he would scarcely think it worth his while to seek medical assistance.

The seat of this disease is usually the trunk, particularly around the abdomen and chest, and the neck. The extremities are sometimes affected, and still more seldom the face. In one very bad case, however, which is now under our charge, it extended over the face pretty copiously, and was very fully and thickly developed on the tongue and internal lining of the mouth, throat, and fauces. In a short time a diarrhoea came on, attended with considerable pain and producing great debility; and it was altogether probable that this symptom was occasioned by an extension of the eruption to the mucous coat of the stomach and bowels. This patient is in the ninth month of pregnancy,

and is doing well. No case has come to our knowledge in which the palms of the hands, or the analogous structure on the feet, have become the seat of this eruption.

It will be easily imagined that the intense itching which characterizes this complaint from its earliest stages, renders it extremely difficult for the physician to discover a pimple at so early a stage as to judge what is the precise nature of the complaint. The heads are usually torn off long before the patient has time to exhibit himself; hence the doubt which exists with many practitioners whether the disease be a Lichen or Eczema. In some cases it may perhaps assume the form of the one, and yet be distinctly vesicular in others. In several instances, however, in which we have examined the eruption as it began to show itself, a drop of semi-limpid matter has been discerned in each pimple; and, placing this fact in connection with the usual course of the disease, and its frequency among children as well as adults, we may set it down with tolerable confidence as an Epidemic Eczema.

In some cases it has appeared to be contagious, and in others frequent contact has failed to communicate it. The evidence on this point is, so far as our own observation and that of our friends has gone, insufficient to warrant any decided opinion.

With regard to the treatment we have little to offer. The predominant symptom has frequently given rise to the suspicion, in the mind of the patient, that his disease was the itch, and sulphur ointment has been resorted to; but whenever the erup-

tion has disappeared by the use of this or any other local application, the consequence has been a greater or less degree of nausea, vertigo, and general febrile excitement. Such applications should therefore be discarded from the treatment of the disease, or used only with such precautions as the judgment of the physician will suggest.

Such very general and brief notice of this distressing epidemic, which is not confined to the city, but spreads widely in the neighboring country, we have considered due to our readers, many of whom are aware of the obstinacy with which it resists the most powerful remedies. When further experience has thrown more light on the subject, a more detailed account may be expected. Medical history furnishes us but little information respecting it, the only notice we have been able to find of any similar epidemic being contained in the works of Hoffman, published in the year 1729.

THE SENSES

Subject to a Variety of Functional Modifications.

AMONG our Sketches will be found an account of two persons in whom the power of distinguishing different colors from each other is defective. This kind of deviation from perfect vision is by no means rare, and many cases are on record where it existed in greater degree than in the cases of Dr. Colquhoun. Mr. Haddard mentions an instance of a Mr. Harris who confounded all the dark colors with black, and all the light colors with white, so that he knew in fact only

black and white. A brother of this Harris always mistook orange for green, and in another brother the defect was still greater.—The history of a case may be found in the Philosophical Transactions, in which full reds and full greens appeared always alike.—In Dr. Brewster's Encyclopædia there is an account of a Mr. Tucker, who had no power of distinguishing orange from green or blue from pink;—Mr. Dalton, the chemist, has the same incapacity for distinguishing blue from pink, and the red in the solar spectrum is scarcely visible to him; and a celebrated historical painter, in our own city, has a peculiarity in judging of colors, which is equally remarkable and inconvenient.—In the memoirs of the Royal Society of Edinburgh, is described the case of a gentleman who could see but four colors, viz. white, yellow, grey, and light blue; and Dr. Nichols relates an anecdote of a soldier, who, having purchased a uniform coat and waistcoat of *blue*, selected breeches of *red*, thinking them a perfect match. These and other cases come to us with the best authority, and in many of them the defect has appeared to be hereditary.

Touching an explanation of these phenomena, different philosophers have viewed the subject in different lights; an explanation which has been perfectly clear to some minds, others have not been able to comprehend; and defects of reasoning have been easily distinguished by one philosopher, which another has had no power of discerning.—The vitreous humor has been supposed by some to have a shade of blue, by

which the red light is absorbed before it reaches the retina, and so on. The fibres of the retina which perceive certain colors, are thought by others to be partially or wholly paralyzed; and a third class, who suppose that rays of light pass through the retina and are reflected back, before perception, by the choroid coat, attribute the phenomena we have alluded to, to a modifying shade of color in the retina itself. Whichever theory we adopt, the explanation appears plausible, and whether we regard the supposed cause of the defect in question, or the analogy of the other senses, it is on the whole somewhat remarkable that these peculiarities of vision are not more frequent.

The same articles *feel* hot to some persons that feel cold to others, and there is every grade of this perception between the two extremes. The peculiarities of *taste* are proverbial; what to some is agreeable, is nauseous to others, and what is decidedly pleasant or disgusting to the palate of one, is often perfectly tasteless to another. So also with the sense of *hearing*. The perception of sounds differs greatly in different individuals. Even among those laboring under ordinary *deafness*, some will hear a *shrill* voice scarcely raised above its usual tone, whilst a *louder* voice is scarcely audible, although raised very considerably; and vice versâ. The note of the common *tick*, or death-watch, as it is tremblingly called by the superstitious, is distinctly heard by some ears, whilst to others equally near, and having an equal acuteness of hearing ordinary

sounds, it is wholly inaudible on the closest attention. Dr. Wollaston says he has met with several persons "who never could hear the squeak of a bat; with some who never heard the chirping of the house cricket; and with one gentleman who never heard the chirping of the common house sparrow;" although their companions could perceive these sounds very distinctly.

Thus do the capabilities of the other senses differ in different persons; and this fact would seem to favor the explanation which appears, at first view, the least probable of the three spoken of, viz.: that the defect of perceiving certain colors must depend on some modification, perhaps paralysis, of the nerves originally designed to receive the impression. This subject is, however, but very imperfectly understood, and offers a wide and an inviting field for the observation and ingenuity of the physiologist.

PRESCRIPTIONS.

The following prescriptions are from the Provincial Medical Gazette.

Nervous Toothach Liniment.

Aromatic spirit of ammonia, 2 ounces; gum opium, 1 drachm. Dissolve the opium in the spirit by maceration. The affected tooth, as well as those in the upper and lower maxilla, to be well rubbed with the liniment every two or three hours during the paroxysms.

Or,—

Camphor, 2 drachms, dissolved in spirits of terebinth, 1 ounce; to be applied as the former liniment.

Or,—

Camphor, 1 drachm, dissolved in

spirit of wine; rectified æther, 1 ounce; oil of cajeput, 2 drachms. Mix to make a liniment; to be applied as directed above.

Toothach with Caries and Exposure of the Nerve.

Powder of gum arabic, half a drachm; tincture of myrrh; compound tincture of benzoin; of each half an ounce: oil of cinnamon, five drops; wine of opium, three drachms. Mix to make a liniment, to be introduced into the cavity of the affected tooth.

The resinous gums of this composition being separated, form a complete coating to the exposed surface, which protects it in a great degree from the irritation produced by extraneous substances. This liniment should likewise be extensively and freely applied to all the teeth and gums.

Rheumatic Toothach unconnected with Caries.

Powdered leaves of pyrethrum, 1 drachm; mucilage of gum arabic, a sufficient quantity to make a paste. Divide it into twelve portions. Take one into the mouth occasionally, and let it remain till dissolved. To be used in conjunction with the liniment, and an aperient dose with colchicum.

Liniment.—Camphorated spirit of wine, 3 drachms; liquor of ammonia, 10 drops; wine of opium, 1 drachm. Mix to form a liniment, to be rubbed on the outside of the cheek of the affected side three or four times daily.

Inflammatory Toothach, with Caries.

Hydrocyanic acid, 1 drop; to be placed in the carious excavation after lancing the gum freely.

The following remedy has obtained great repute on the Continent:—

Extract of henbane, 1 drachm; gum opium, half a drachm; extract of belladonna, and camphor, of each 6 grains; oil of cajeput, and tincture of cantharides, of each 8 drops. To be mixed into a paste, with which the decayed tooth is to be filled.

Ruspini's Tincture.

Florentine iris root, 8 ounces; powdered cloves, 1 ounce; ambergris, 1 scruple; spirits of wine, 2 pints. Macerate for fourteen days, and strain for use.

This application we have used with great relief where the teeth have evinced tenderness on inhaling atmospheric air, or on the application of cold liquids, such as occasionally takes place after the operation of scaling.

Chevalier's Unguent for Cancer.

Flowers of digitalis, one-sixth part; fresh butter, five parts: to be prepared by boiling until the leaves are crisp, and then strain. Mr. Chevalier has found this application very efficacious in diminishing the activity of cancerous ulceration.

Chevalier's Unguent for Acute Rheumatic Inflammation.

Extract of belladonna, from an eighth to a fourth; oil of lavender, six drops; lard, two ounces: mix. The parts affected to be rubbed with this ointment *only* until the pain begins to abate, and left upon it afterwards *only* while the pain continues to be present.

Sir Henry Halford's Ointment for Hemorrhoids.

Ointment of nitrate of mercury, almond oil, of each equal parts; mix in a porcelain mortar: to be applied to the parts two or three times daily.

Sir Gilbert Blane's Mixture for Red Gravel.

Cinnamon water, two ounces; mucilage of gum arabic, two ounces; clarified honey, one ounce and a half; solution of potash, three drachms; wine of opium, forty drops; to which may be occasionally added two drachms of the compound spirit of juniper: take two large spoonful three times a day in a cup of barley water. Sir G. Blane has prescribed this, we understand, with great advantage, for a high personage.

Sir William Knighton's Pills for Red Gravel.

Dried carbonate of soda, hard soap, of each a drachm; extract of uva ursi, one scruple: mix to make thirty pills. Two to be taken three times a day.

Vance's, (late of Haslar Hospital,) Stomachic Mixture for Dyspepsia.

Sulphate of quinine, twelve grains; diluted sulphuric acid, two drachms; tincture of orange peel, one ounce and a half; tincture of hops, half an ounce: mix. A dessert spoonful to be taken in a glass of tepid water half an hour before breakfast and dinner daily. It is an elegant and grateful preparation, and very beneficial when a sense of distension and flatulence is experienced after eating.

Dr. Middleton's, (late of Southampton,) Aperient for Children.

Take of senna leaves, one drachm and fifteen grains; manna, one ounce; supertartrate of potash, forty-five grains; boiling water, eight ounces: macerate for two hours, and strain. This mixture, in the dose of three or four spoonfuls, is moderately aperient, and, from its being extremely palatable, it may be conveniently administered to children where there is difficulty in getting them to take medicine that may be somewhat nauseous.

Menorrhagia.—The leaves of the red hollyhock, made into a conserve, are said to be an effectual remedy for this complaint. This is the proper season for gathering them.

Power of the Will over certain Muscles.—It is said of Fuseli, a celebrated painter, that he had the power of ejecting the contents of his stomach at will, and without nausea. When a dinner or any particular article of food disturbed his digestion, he would retire and throw it off with great facility. There are few persons who possess such power over

the muscles concerned in the process of vomiting.

Journal of Humanity.—A weekly newspaper with this title has been recently commenced at Andover, in this State. It is devoted to the Suppression of Intemperance, and contains many interesting and useful essays on topics connected with this subject. The numbers which we have seen of this journal, contain more original matter, we should judge, than any other newspaper printed in this country. We recommend the work to the profession, as containing many good prescriptions for preventing the use and removing the effects of one of the most noxious poisons which can be introduced into the animal system.

TO THE FACULTY.

The Editor will be happy to receive more frequent Communications on subjects interesting to the Profession. As this Journal is not connected with, or devoted to the interest of any school, party or institution, this invitation is intended to be universal. It is addressed, however, more particularly to the Subscribers, and to the medical and surgical officers of Hospitals and other Public Institutions; for among the former are the most intelligent and talented members of the Profession in New England and many other States—and at Public Medical Establishments peculiar opportunities are offered for extensive experiment and observation, the result of which must be particularly valuable to the Medical Practitioner.

REPORT OF DEATHS IN BOSTON,

The week ending July 8, at noon.

Of abscess on the brain, 1—consumption, 2—dropsy, 2—dropsy in the head, 1—infantile, 2—inflammation in the bowels, 1—intemperance, 1—lung fever, 1—measles, 2—palsy, 2—rupture, 1—typhous fever, 1—suicide, 1—unknown, 3. Males, 12—females, 9. Still-born, 1. Total, 22.

ADVERTISEMENTS.

NOTICE.

BOOKSELLERS, PUBLISHERS, and AUTHORS, are informed, that by transmitting to the Editor, free of expense, a copy of such works as they may write or publish on subjects interesting to the medical profession, they will be entitled to a notice of such works in the pages of this Journal.

CARTER & HENDEE

HAVE just received **LIZAR'S ANATOMICAL PLATES**, in 12 Nos., cold and letter press.

Barton's North American Flora, 3 vols.

do. Medical Botany, 2 vols.

Bonaparte's Ornithology, 3 vols.

A System of Human Anatomy; translated from the 4th Edition of the French of H. Cloquet, M.D. By **ROBERT KNOX**, M.D. F.R.S.E.

TURNER'S CHEMISTRY,—NEW EDITION.

JUST published, and for sale, by **CARTER & HENDEE**,—Elements of Chemistry, including recent Discoveries and Doctrines of the Science. By **EDWARD TURNER**, M.D. F.R.S.E. Second American Edition.

MANUEL FOR THE USE OF THE STETHESCOPE.

CARTER & HENDEE have recently published,—A short Treatise on the different Methods of investigating Diseases of the Chest. Translated from the French of M. Collins, by **W. N. RYLAND**, M.D. From the third London Edition, with Plates, and an Explanatory Introduction, by a Fellow of the Massachusetts Medical Society.

In preparing for the American press the English translation of the well known and highly useful work of M. Collins, which translation has passed through three editions in England, the Editor thinks he can render it more acceptable by dispensing with the various prefaces and introductory remarks which encumber the last edition, and by substituting in their place an entirely new introduction, which is in-

tended to embrace the amount of all that is important in the prefaces alluded to, as well as that which is contained in various abstracts and reviews which have appeared of treatises upon the different methods of investigating thoracic diseases, and in some other works which are not generally before the profession in this country.

C. & H. keep constantly for sale **Stethoscopes** of the most approved form.

FRENCH WATER COLORS.

COTTONS & BARNARD, 184 Washington Street, have for sale, the following Water Colors, of an excellent quality, manufactured by P. C. Lamberlye, (France,) viz: Bistre, Raw Cassel, Burnt Umber, Raw Umber, Egyptian Brown, Vandyke Brown, Brown Pink, Seppia, Violet Lake, Carmine Lake, Sanders Blue, Prussian Blue, Mineral Blue, Indigo, Yellow Ochre, Yellow Mineral, Gamboge, Yellow Orpiment, Yellow Lake, Naples Yellow, Burnt Italian Earth, Burnt Sienna, Raw Sienna, Italian Earth, Crocus Martial, Green Lake, Sanders Green, Sap Green, Mineral Green, Prussian Green, Vermillion, Saturnine Red, Indian Red, Red Ochre, Red Orpiment, Flake White.

Also—a great variety of Newman's, Ackerman's, Reeves's and Osborne's Colors, in boxes and separate cakes.

DENTAL SURGERY.

THIS day received by **CARTER & HENDEE**, No. 135, Washington Street,—A SYSTEM OF DENTAL SURGERY. In three parts.

1. Dental Surgery as a Science.
2. Operative Dental Surgery.
3. Pharmacy connected with Dental Surgery.

By **SAMUEL SHELDON FITCH**, M.D., Surgeon Dentist. Denticum curam habeto ut bene digeras et diu vivas; laxatis dentibus laxantur et chylaceos officinæ; hinc mille malorum occasiones.—Baglivi XIII. March 17.

ep6w

A COPY of Bloomfield's Critical Digest of Sacred Annotation on the Gospels, 3 vols. 8vo. "The most learned Commentary in the English language." For sale by **COTTONS & BARNARD**, 184 Washington Street.

Published weekly, by **JOHN COTTON**, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

Communicated for the Medical and Surgical Journal.

STRICTURE OF THE RECTUM

In which the Calibre of the Intestine was wholly obliterated.

By Dr. JOHN STEVENS, Lic. Mass. and N. Y. Med. Soc.

Mrs. D., of Charlestown, aged 48 years, had, for the most part of her life, enjoyed good health. In July, 1828, she was taken with pain in the bowels, accompanied with constipation, vomiting, rigors, &c. The pain was rather unusual, coming on at intervals, and very nearly resembling the pains which take place in the last stage of labor. I made an examination per vaginam, and found the uterus enlarged and apparently pressing hard upon the rectum. She had not menstruated for more than four months, and was persuaded that the womb was affected. I pushed the uterus backwards and upwards, as far as possible, and requested her to keep in a recumbent posture,—bled her freely, gave her an infusion of senna, and blistered the abdomen. On the fourth day she had an evacuation, which gave partial relief, but the pain still continued very severe. I gave Pil. Hyd. with Extract Conii, a pill every six hours, and she gradually recovered; since which time Mrs. D. has suffered much from constipation of the bow-

els, having had a similar attack as often as once in every five or six weeks, which has lasted from five to eight days, but finally yielded to the same mode of treatment.

June 16th, 1829, I was again called to visit Mrs. D., and found that she had had no fecal evacuation for some days, probably ten or twelve. The precise time could not be ascertained. Her pulse were good, and there were no febrile symptoms; her pains were severe, and as above described, similar to travail pains, but there was no enlargement of the uterus. She had taken a dose of the Sulph. Magnesia, and also a dose of the Compound Tincture of Aloes, without effect; but after retaining them on the stomach for some hours, had thrown them up. I gave a decoction of senna, mauna, and jalap, and enemas of the same.

17th.—No better. Gave Hyd. Subm. gr. x., Pulv. Jalap. gr. xx., and continued enemas.

18th.—No better. Much rumbling in the bowels, as has been usual in every attack. Gave Ol. Ricini et Ol. Terebinth.

19th.—No better. Continued enemas and used warm bath.

20th.—No better. Gave Sulph. Soda, as much as the stomach would bear, through the day.

21st.—No better. Gave pills of Hyd. Subm., Jalap and Colocynth; continued enemas and used friction.

22d.—No better. I informed Mrs. D.'s friends that I considered her in great danger, and wished for a consultation. They made choice of Dr. Brown, of Boston. He saw her in consultation this day, and continued to visit her daily with me during the remainder of her life. He entered into a minute examination of her case, and perfectly agreed with me as to its nature and mode of treatment. A large blister was immediately applied to the abdomen, and two ounces of the Infus. Sennæ Comp. directed every two hours, and enemata continued; also the warm bath.

23d.—We saw the patient again. No relief had been obtained. Gave Subm. Hyd. et Pulv. Jalap. in large doses; continued enemata.

24th.—No better. Applied an emollient cataplasm over the whole abdomen, and gave a pill composed of Pulv. Jalap. et Subm. Hyd. et Ol. Croton, minim one, every four hours. Continued enemata.

25th.—No better. Pills had been retained. Gave an injection of the Infus. Tabaci: it was retained but a short time; it however caused a slight degree of nausea and dizziness. A solution of the Sulph. Soda was given through the day, as the stomach would bear.

26th.—No better. Directed Hyd. Subm. 3i.—ʒi. to be given every four hours, and enemata continued of senna and salts.

27th.—No better. Gave Ol. Riciini et Ol. Terebinth. equal parts, as much as the stomach would bear, and enemata of the same through the day.

28th.—No better. Much irritation; abdomen somewhat enlarged and tense; sphincter ani relaxed; pulse upwards of 100. Gave enemata of flaxseed tea with Tinct. Opil.

29th.—Worse. Symptoms of inflammation strongly marked; pulse 120 and hard. Bled freely; continued enemata, and gave Tinct. Opil, to procure temporary relief, as the pain was intolerable; gave also an injection of Decoct. Tabaci.

30th.—Considered the case as perfectly hopeless, and recommended a palliative course merely, which was continued until July 2d, when she died in great agony.

Post-mortem Examination.

Previous to her death, being perfectly aware of her situation, she very judiciously and composedly requested me to examine her body, and ascertain the cause of her extreme suffering and death. Accordingly, on the 3d of July, about ten hours after her decease, I proceeded to an examination, assisted by my friend Dr. Sprague. Dr. Brown was also present.—On opening the abdomen, the whole intestinal canal, together with the omentum, was obviously in a state of high inflammation: it was very much distended with flatus and liquids of different kinds, which had been taken; it also contained, dispersed throughout its whole extent so far as traced, a large quantity of green mucus, blended with feculent matter in a liquid state. The intestines were carefully dissected from the mesentery, and accurately examined from the stomach down to the rectum; but no cause of obstruction was met with, until we entered the pelvis. We then discovered a firm stricture of the rectum: the part appeared precisely as though a ligature had been passed tightly round the intestine. On further examination, it was found that the calibre of the rectum was entirely obliterated; a small probe could not be passed through it. This stricture could

not have been of recent origin, as there were no symptoms of recent inflammation, either about or below it; in fact, this part of the intestinal canal was the only part free from inflammation.

Query,—was this stricture occasioned by an occasional enlargement of the uterus, or did it arise from accidental and unknown causes?

Charlestown, July 13th, 1829.

II.

Communicated for the Boston Medical and Surgical Journal.

CAROTID ANEURISM,—OPERATION.

Performed at the House of Industry at South Boston,

By WINSLOW LEWIS, Jr., M.D.

THE subject of the following operation was a colored female of 26 years of age, married, of very intemperate habits, and of an excessive irritable temperament. Her ordinary occupation was that of a domestic, but her labors were severe, and she was accustomed to carry heavy weights on her head. During an exertion, about five months since, to raise a large body for the purpose of placing it on her head, she thinks she "felt something give way," was immediately faint, and soon after perceived a tumor on the left side of her neck. This increased slowly, and at times caused great pain in the head and eyes, with vertigo; and for some time past she has expectorated a bloody mucus. For the relief of these distressing symptoms, she entered the House of Industry February 25th, 1829. I found, on examination, a tumor of the size of a pigeon's egg on the left side of the neck, under the angle of the jaw, pulsating and exhibiting the usual characteristics of aneurismal disease.

I waited for some weeks, to observe if any effect might be produced on the tumor by the total deprivation of ardent spirits, which must have so much increased the circulating force. I also, during this time, applied over it a moderate compression, and put her upon the lowest diet. This was wholly ineffectual as regarded the disease, but her general health became much improved. With Dr. Warren in consultation, the operation was advised, but during the examination to determine the nature of the disease, the necessary pressure on the tumor for the purpose of emptying it, caused such excessive pain and excitement that it could not be effectually done. However, enough could be ascertained to show the true character of the tumor, and to distinguish it from ordinary swellings in that part; for the tumor did not move with the larynx or trachea, and other indications were evident of aneurism of the common carotid.

Operation, March 9th.—The patient was placed in a chair, with the head inclined to the right and a little bent backwards. The incision was made over that spot where the sterno-cleido-mastoideus muscle crosses the omo-hyoideus, in the direction of the fibres of the tracheal portion of the first named muscle. After the common sheath was exposed, the patient fainted. The operation was completed without difficulty, except that the internal jugular would occasionally interfere with and cover the artery. The patient did not complain of any peculiar sensation on tying the ligature. The pulsation above immediately ceased.—Half an hour after the operation, she suffered from pain on the left side of the head and in the region of the tem-

poral muscle; and then, and for some time after, asserted that a tooth was drawn during the operation.

March 10th.—Still pain as above, and also *very severe in the two first molar teeth*, extending to the occiput; very restless and irritable; has had, since last evening, a difficulty of swallowing.

11th.—Slight delirium yesterday; pain in the head constant; saliva from the affected side; deglutition painful; pulse 104.

12th.—Better; but while swallowing feels great vertigo.

13th.—Ptyalism diminished; expectorated some bloody mucus. Examined the wound, which had healed with the exception of the place kept open by the ligature.

25th.—Endeavors to withdraw the ligature cause great pain in the above-mentioned teeth.

April 1st.—Ligature removed without further pain in the teeth.

4th.—Discharged.

July 1st.—The above patient is now in good health, nor has she experienced any inconvenience since she left the House. The tumor has entirely disappeared.

La Grange Place, Boston.

III.

Communicated for the Boston Medical and Surgical Journal.

IRREGULAR GESTATION.

A Case exhibiting some singular Phenomena in Parturition.

By JOHN HOMANS, M.D.

MR. EDITOR,—The following extraordinary case having recently occurred to me, I beg to make it public through your Journal.

In September, 1827, Mrs. N., who had been married several months, supposed herself pregnant from indications which rarely de-

ceive. From this time until the third month, morning sickness attended her; she increased in size until between the sixth and seventh month, when there was an evident diminution, so that by the ninth month she was not larger than at the fourth. At this time she was seized with regular labor-pains and sickness at the stomach; these continued for twenty-four hours, when they ceased, and she returned to her accustomed occupation. She however continued to diminish in size, and in the following August was no larger than before she supposed herself in this situation. In the next September I was called to her in haste on account of profuse uterine hemorrhage, attended with labor-pains. Before I arrived it had abated; but something was preserved for examination, which proved to be a foetus attached to its placenta by a cord. The foetus was one and a half inch long, and of corresponding breadth: on it was clearly delineated the head with the features of the face, the arms (to the hand) attached to the body, and the lower limbs joined together. The cord was about two inches in length, and the placenta of proportionate size. The foetus and placenta were remarkably firm, and evinced that they had been closely pressed. The time of delivery was within a few days of twelve months from the time of conception.

Boston, July 13th, 1829.

IV.

Abridged from the London Weekly Review.

STATE OF SURGERY IN SIBERIA AND ASIATIC RUSSIA.

DR. HENRI DE MARTIUS, who resided some years in Russia, has drawn the following hasty sketch of the different methods of cure

in use among the Nomadic nations of Siberia and Asiatic Russia.

Baths, and especially vapor baths, constitute an important part of the external treatment of all diseases.—The principal surgical operation is bloodletting, which is performed with any instrument whatever,—with a blunt lancet, a scalpel, a bistoury, a two-edged needle, or with a peculiar little knife with three points. The Kalmucs make use of a kind of fleam, with the cutting blade of which they open the vein, with the assistance of a little iron hammer, with which they strike the blow. The Asiatic tribes employ a spring instrument, (*arbalete*,) the dart of which penetrates the vein when they let go the spring. In Kamtschatka, the vein near the ankle, (*vena saphena major*,) is opened by means of a little knife, a bodkin, a needle, an awl, &c.

The application of leeches is not unknown to these tribes ; and the mode of proceeding is very simple. In summer, those who are desirous of getting rid of a portion of their blood, undress themselves and plunge into a river or pond containing leeches ; when these animals have sucked a sufficient quantity of blood, they are made to fall off with a little sea-salt. For winter use, the leeches are placed with water in pits of clay, and the water is allowed to freeze ; when they are wanted for use, the ice which covers them is melted.

Scarification, or acupuncture, is employed in colic, in almost all tumors and abscesses, and in the anthrax of Siberia. To make incisions, they use sharp pieces of broken glass, pike's teeth, muscle shells, &c.

In angina and difficulty of deglutition, they pierce the uvula at different times with a needle or an awl. In ophthalmia, the eyelids are scarified with little knives, or with flattened needles with two edges ; a bandage of black or green stuff, or a gauze of black horse hair, fixed over the eyes, serves to soften the too powerful impression of the rays of light. Tattooing is a cosmetic process among the Ostiaks and Tungusians.

Inoculation for the smallpox has been practised from time immemorial in the Steppes of Asia. The Mongoles fasten the crust of a variolous pustule over a scratch made on the hand or foot. In Grucinia and Georgia, they make a superficial crucial incision between the thumb and fore-finger, and, after having wiped away the blood, touch the little wound with the variolous matter, which they preserve in a little box or flask of horn ; they then cover the whole with a piece of cotton. At Barnaoul, at Kiachta, and in the other places on the frontiers of the government of Jekoutsck, they introduce into the nose a wick impregnated with the variolous matter. The Tungusians and Buriats apply a layer of the lymph which oozes from a variolous pustule to the cheek or forehead.

For cupping, in many countries of Russia, they are in the habit of applying to the belly cast-iron pots, the air within which they have rarified by means of a little lighted tow ; women and girls sometimes employ them for the purpose of procuring abortion. In the vapor baths they use friction with pieces of coarse woollen stuff, and flagellation with young twigs of birch. Beating with sticks or the knout is sometimes

practised as a remedy in mental diseases. Setons are very often used by the tribes of the Steppes. Cauterization with iron or copper needles red-hot, with which they pierce tumors which have not yielded to other means, is sometimes very efficacious. The moxa is one of the means in most frequent use; it is made with cotton thread: before applying it, the skin is covered with a layer of the white of egg, of isinglass, or of strong glue. Moxas are also made with hemp, flax, and amadou: the Kalmucs employ for this object the centaury of Siberia, (*centaurea Sibirica*,) the down of the seeds of several species of willow, &c. The Mongoles, previous to the application of the moxa, sprinkle the place with a thin layer of potters' earth or clay. The Ostiaks and the Tungusians prepare the moxa with the woolly and yellow fibres which are found in the fissures in the bark of the birch. In Siberia, the down of several species of mugwort is employed for the same use. To apply the moxa, they seek for the least sensible part of the skin by means of a burning coal, which serves for a trial.

In very obstinate tetters, and in very inveterate itch, many tribes of the Steppes use, in the form of cataplasm, a little insect akin to the *meloe*. Aquatic hemlock and mezereon serve as vesicatories in Siberia.

Pessaries are made of soap, of hardened tallow, or of the flour of rye, with simple syrup or honey: the Kalmucs form them with honey and common salt. In obstinate constipation they place the patient on a sandy and dry eminence, and apply to his stomach a smooth flint, which has been made very hot.

The principal cosmetics of these nations are the fresh juice of Solomon's seal, (*convallaria polygonatum*,) decoctions of the bark of *Daphne mezereum*, *echinum vulgare*, &c.

The obstetric art comprises many very singular practices. Amongst the Kalmucs, when the child is on the point of being born, the midwife gives a signal, by which the husband and his friends posted near the house are apprised, and discharge their firearms: this unexpected explosion, and the fright of the mother, are supposed to assist in hastening the delivery.

Persons bitten by a tarantula, or stung by a scorpion, are first drenched with milk, and then swathed in a basket, which is poised and whirled in the air by means of a cord, until abundant vomiting and profuse perspiration are induced.

V.

Communicated for the Boston Medical and Surgical Journal.

MEDICAL SPOON.

A brief Description of this newly-invented Instrument,

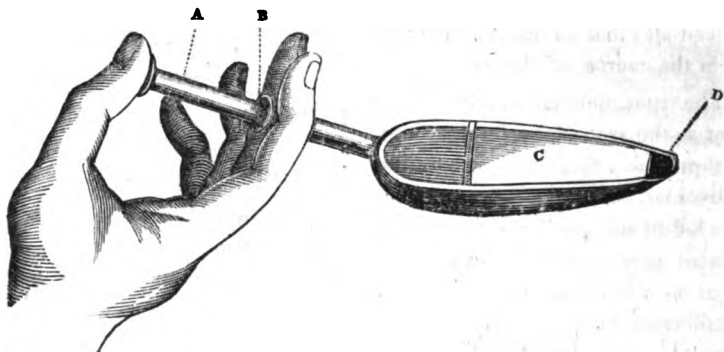
By CHANDLER ROBBINS, M.D.

HAVING procured one of these spoons from the maker, I take the liberty to give the profession a brief description of it through the medium of the Medical Journal. The object for which it was invented by Dr. A. T. Thomson, of London, was to administer medicine to infants and children, to persons so ill as to require food or physic whilst in a horizontal posture, and to maniacs.

A general idea of this instrument may be obtained by compar-

ing it to a common spoon covered entirely over, excepting only a small space near the point through which the contained liquid is to flow. If such a spoon were filled, its contents would evidently be prevented from flowing into the mouth by the pressure of the air on the exposed surface. This

evil is avoided by making the handle a hollow cylinder opening into the bowl, as represented in the engraving below.—For the purpose of introducing the mixture to be given, more readily into the spoon, a lid is fixed into the cover, which may be raised and shut again at pleasure.



When used, the lid C is to be closed tight on the liquid which has been introduced; the handle is then to be taken between the middle and fore fingers of the right hand, which fingers should press on the guard B; the thumb being then placed on the open end of the handle A, the instrument will be firmly supported.

When the bowl of the spoon is introduced into the mouth of the child, it should be pressed down on the tongue, and the thumb being then removed, the medicine will flow readily out at D, and pass into the stomach.

The advantages of this invention are so obvious as to need no illustration.

SKETCHES OF PERIODICAL LITERATURE.

DYSPHAGIA,

Attended by very unusual and singular Circumstances.

In a late number of the Archives Générales de Médecine, is reported a singular case of this disease, the precise nature of which it was not found easy to determine. The patient, a man about sixty years of age, while swallowing a large piece of meat, suddenly experienced a sense of

stricture, as if the morsel had been arrested at the entrance of the œsophagus. In a short time he began to experience a constant desire of deglutition, but without the power, notwithstanding his continual efforts, to swallow the smallest portion of saliva or of any liquid which was offered him. He was incessantly making the motions preparatory to the act of deglutition, and when fatigue

obliged him to remit these efforts, a noise was heard like that of air escaping from the œsophagus. In the mean time, the respiration and speech were perfectly free, and no change of form or color could be discovered in the pharynx or external part of the neck. A bougie which passed freely into the stomach, proved also that no obstruction existed in the course of the œsophagus.

The spot pointed out by the patient as the seat of the foreign body, was precisely that occupied by the os hyoides, and the attending surgeon was led to suppose from the circumstances present, that some displacement must have occurred of the apophyses of this bone. In pursuance of this idea, he carried the fore-finger of his right hand into the throat of the patient, so as to act on the os hyoides, while his left hand was pressed upon the throat and upon the same bone externally. The effect was immediate; the painful sensation under which the patient had been laboring was removed, and he at once recovered the power of deglutition. Two years after the same individual had a similar attack, and the same mode of treatment proved equally successful.

Dr. Ollivier, who reports the case, though not attended by himself, thinks the best explanation of the phenomena to be, that from a violent effort of deglutition, the os hyoides was carried downwards in such a manner that one of its cornua engaged itself in the corresponding cornu of the thyroid cartilage; or that its inferior cornua being pressed downward and approximated to each other, may

have become fixed in the space intervening between the apophyses of the thyroid. Such a displacement would be rendered possible and even likely to happen, by the excessive length of the cornua of the hyoid bone or of the thyroid apophyses, or by any irregularity in the direction of these processes.

HYDROPHOBIA.

IN Rust's Magazine is the history of a case of Hydrophobia in which *transfusion* was tried. A large quantity of blood was abstracted from the arm, and its place supplied by blood from another. It had no good effect, and the patient died.

It appears also by a paper in Hufeland's Journal, that Dr. Mayer, of St. Petersburg, has tried transfusion in a similar case, and with a like unsuccessful result. He took five ounces of blood from the arm, and, according to Magendie's plan, a pint of *water*, at 101 degrees, was injected into the cephalic vein. During the operation, a burning sensation in the region of the subclavian was experienced by the patient; and the pulse afterwards fell from 90 to 60, and became very small. This injection was used five times in about two days. A sense of fullness and heaviness about the heart was complained of; a profuse perspiration broke out, and the patient died of tetanic convulsions. It will be recollected that these spasms are in the usual course of the disease, and although in no degree mitigated by the warm water injections, cannot justly be attributed to them.

In the North American Journal is an interesting paper by Dr. Rosseau, in which he relates three cases in which symptoms resembling Hydrophobia were produced by other causes than the bite of a rabid animal. One case is also mentioned in which a man who had been bitten on the finger by a dog which was afterwards destroyed as mad, recovered without any ill consequences. These cases, and the author's reflections, have convinced him that there is no specific virus conveyed in the bite of a mad dog, capable of producing the train of symptoms comprehended under this title; and that where such symptoms have followed a wound inflicted by this animal, they are to be regarded as constituting a variety of tetanus, and as caused by the laceration itself. Dr. R. thinks that animals are often suspected of madness without reason, and that the signs of this disease are very indeterminate. In common with many previous writers, Dr. R. views the hydrophobia itself as arising from a spasm of the fauces, which renders swallowing difficult, and inspires the patient with a horror of renewing his efforts to effect it.

REMEDIAL VALUE OF ARSENIC.

THE Journal last quoted contains some remarks on this subject by Dr. Coxe, who is of opinion that an excess of caution has been used in the administration of this medicine. He quotes a case in which fifty drops of the solution were taken three times a day by a female without inconvenience, and the medicine continued at intervals for four years,

during which time the whole quantity taken exceeded a quart. Dr. C. thinks that considerable doses, continued for a short period, are more effectual and less hazardous, on the whole, than smaller quantities persevered in longer. The good effects which have been evinced by this article in cutaneous diseases, particularly of a leprous character, entitle it, according to Dr. C., to greater confidence in these cases than any other remedial agent; and it ought, in his opinion, to be employed at an earlier period than has been usual, without obliging the patient to wait till every other mode of treatment has been exhausted. Our own experience with this remedy leads, however, to different results.

HEMATEMESIS.

DR. CONDIE remarks in the same Journal, that he considers the proximate cause of hemorrhage from the stomach to be congestion of the capillaries arising from irritation. In the treatment of this affection, he condemns the metallic astringents as decidedly injurious, and recommends the use of ipecacuanha in small and repeated doses. The good effects of this remedy have frequently been ascertained by practitioners, and are confirmed by the author's own experience. The hemorrhage is indeed frequently arrested by giving a scruple or more of the powder so as to produce vomiting; but a better mode consists in the repeated exhibition of much smaller doses so as to produce nausea. Small doses of calomel, given in like manner, have also been found useful.

BOSTON, TUESDAY, JULY 28, 1829.

JONES ON THE NON-EXISTENCE OF
MALARIA.

WE gave last week a relation of the circumstances attending and consequent on exposure to marsh miasmata, with an analysis of the excellent work of Dr. McCulloch on this important subject. Although the effects and the laws which regulate the action of malaria have been hitherto but imperfectly investigated, the *existence* of this latter has been generally,—we had thought universally,—acknowledged. The pamphlet of Dr. Jones, of Georgia, in which he denies its existence, must therefore be considered as one of the novelties of the day. The notice we shall take of this Essay will amount only to a brief but impartial statement of his views, putting far from us any attempt to oppose these views, and still farther any endeavor to uphold them.

Touching the history of this Essay,—it was first read before the Central Medical Society of Georgia, and subsequently sent to Dr. Hays, to be published in his *American Journal of the Medical Sciences*. Dr. H., after a careful perusal, returned it to the author, with some marginal notes pointing out inaccuracies in the statement of facts, and some feeble points in the arguments. Dr. H. also wrote to Dr. Jones that his motive was to have the essay appear as strong and creditable as possible, and requesting that it might be sent back to Philadelphia in time for insertion in the next number. All

this, which to us appears extremely friendly on the part of Dr. Hays, and a mode of procedure highly honorable to him as a man and as an Editor,—the more so since he is himself a staunch miasmatisist,—was received by Dr. J. as evidence of a desire to oppose his views, and of an unwillingness to have the article published in the *Journal*. This latter was more particularly inferred from the fact that the MS. was returned for correction at so late a period as to allow but two days, (ample time, we should suppose,) for revision and correction. Accordingly, as others have done before him, Dr. J. issued his essay in the popular form of a pamphlet, and appended thereto the marginal notes of Dr. H., with suitable replies.

In this Essay two propositions are clearly stated, viz :—

1st. "That no such deleterious miasmatic exhalations, so destructive to health, exist, except in the imaginations of speculative theorists," and,

2d. "That moisture, under different states of temperature, acting on the human frame under different states of the cutaneous functions and muscular relaxation, are the sole causes [is the sole cause] of intermittent and remittent bilious fevers." The arguments adduced in support of these positions are, as we understand, the following :—1st. That no chemical analysis or process of eudiometry has been able to detect any difference in the composition of healthy and unhealthy air. 2d.

That the agency of cold, particularly that which is produced by dampness, in checking perspiration and thereby producing fever, is at once conformable to reason and demonstrated by experience. 3d. That intermittents, or what are called malaria fevers, are most prevalent in moist tracts of country, and that without any reference to putrefaction or collections of stagnant water. 4th. That patients affected with intermittent frequently recover under proper treatment, without change of situation, which could not be the case if the cause of disease existed in the atmosphere, because the continued application of this cause would render all remedies unavailing. 5th. That hydrogen gas, to the presence of which the noxious quality of malaria is by many attributed, is not capable, under other circumstances, of producing intermittent fever. 6th. That the necessity of the presence of vegetable putrefaction, which is contended for by the miasmatisists, is disproved by the want of vegetation in the Campagna di Roma and on the Pontine marshes.

Although Dr. Jones maintains the foregoing arguments to have been suggested to him solely by his own observation, a claim which we certainly would not deny, we believe most of them to have been advanced before, and that Dr. J. might have found some of them answered in the popular works on this subject. As far as we understand Dr. J., he does not himself deny the existence of malaria in the strict sense of the term, since he admits that it is through the medium of the atmos-

phere that his morbid agent produces its effects. The controversy, then, between him and the miasmatisists, turns on two questions. The *first* is, whether the presence of vegetable decomposition is necessary in order to create this morbid atmosphere; or whether heat and moisture are adequate to its production. This question it is obvious must be decided by experience; on this ground it is discussed by Dr. M'Culloch in his treatise, page 466—476, and on this ground it is also discussed by Dr. Jones; but while the latter accuses the former of making assertions without proof, we cannot see that his own induction is more extensive or his facts more accurately drawn.

One of the arguments advanced by Dr. M'Culloch against the production of malaria by heat and moisture, is its non-existence at sea in tropical latitudes. To this Dr. Jones replies, that the cause is to be found in the sea-salt; whereas it has been shown by the former author, that salt water in similar circumstances is nearly if not quite as injurious as fresh. The replies made by Dr. J. to other objections against his theory, do not appear to us more satisfactory, and we fear will not satisfy the majority of his readers.

The *second* point at issue between our author and the miasmatisists is, whether any union exists between the atmosphere and its noxious ingredient, by which the chemical constitution of the former is altered. The negative of this question certainly gains great support from the argument before mentioned as derived from analysis; and to this the mias-

matist confesses himself unable to furnish a full and entire answer. This, however, is perhaps of less importance than might at first appear. The doctrine of malaria can be but little affected by any speculations in regard to the nature of the combination between the atmosphere and the poison. The composition of the air is still involved in mystery, not only as regards the mode of existence of vegetable effluvia, but even that of moisture itself. "In fact," says a late writer in summing up the doctrines of philosophy on this subject, "little knowledge has yet been acquired of the causes of many of the phenomena of meteorology. It is not yet demonstrated how water rises in the air, in what state it exists, or how it is condensed." Even admitting, therefore, the adequacy of heat and moisture to produce the whole effect which Dr. J. ascribes to them, we seem hardly to be justified in inferring the non-existence of malaria, even in the fullest sense assigned it by the miasmatisers.

But if Dr. Jones has failed in establishing his theory, it must be confessed that he has adduced in its support some ingenious arguments, and illustrated it by many curious and important facts. Unfortunately, some of these last are somewhat loosely stated, and in their present form are open to contradiction. We noticed also some inaccuracies of expression, and several grammatical errors, which must have occurred in the haste of composition, and which Dr. Jones will do well to correct in the event of his publishing a second edition.

Finally, with regard to the gene-

ral question of the nature of malaria, we confess ourselves still very much in the dark, and unwilling to yield an assent to either of the above authors. That the cause of intermittents is merely a combination of heat and moisture acting under the circumstances stated by Dr. Jones, seems to be contradicted by the fact that in our latitudes, in persons who are exposed to the extremes of both during oppressive and protracted summers, such exposure is never known to produce fever and ague; but if the same persons pass ever so rapidly through a malaria district, that disease is not unfrequently induced. The same objection will apply to Dr. M'Culloch's doctrine that the miasma which produces intermittents is the production of decaying vegetable matter in contact with moisture under a certain elevation of temperature. On the flats which border some parts of our city, for example, hundreds of individuals, of all descriptions, are exposed week after week to this combination during the heats of summer, and yet the effects ascribed to such exposure are not produced.—It cannot be replied that it is necessary to these effects that the air thus poisoned should act on a system modified by a southern climate; for the individuals last alluded to, after resisting this noxious atmosphere, are apt to be attacked by intermittents if they pass through a malaria district. The worst cases of the disease we northerners have to manage, are not in constitutions formed under the influence of a tropical sun, but in our own men and women, who have contracted the

disease whilst passing in the haste of business, or the still greater expedition of what they call pleasure, through the regions of marsh miasmata;—persons who have inhaled the poison in a single hour, whilst whistling for want of thought on the box of a stage-coach, or quietly sleeping on the deck of a canal boat.

With regard to the *effects* of malaria, the profession has been greatly enlightened by the labors of Dr. M'Culloch; its *nature* still remains enveloped in too much mystery.

BLISTERS IN ABORTION.

WE noticed last week, among our Sketches, a case recorded by Dr. Belden, in the last New York Med. and Phys. Journal, in which abortion appeared to be prevented by the establishment of an issue from a blistered surface. We have since received the following note, confirming this view of the subject, from a valued correspondent at Lynn.

To the Editors of the Boston Medical and Surgical Journal.

Honor to whom honor is due.

GENTS.—The fact communicated in the Journal of this day's date respecting the efficacy of issues in preventing abortion, is by no means new, as may be seen by reference to "the thirteenth edition" of Marryat's "Art of Healing," page 240, published in Bristol, England, 1792; from which the following extract is made, and is at your service.

R. H.

"The *cure* [of Abortion].—Prevention is all we are capable of in these cases. Where there is a proneness to miscarry, from a laxity of the muscular fibres, or if she has miscarried before, it will be necessary to use the same regimen as that recom-

mended under WEAKNESS of the SOLIDS, and to keep an issue constantly open. I knew a lady who miscarried twice, then opened an issue, and while it continued had three living children; she then suffered it to dry up, and again miscarried; it was cut again shortly after, and she bore five strong and healthy children. Her issue then dried up spontaneously, after which she miscarried three times successively.

July 21st, 1829.

ROOTS AND HERBS.

AN advertisement in the Virginia Phoenix, headed "The New York Medical Academy," caught our eye this morning, and gave us the first intimation we had received of the efforts making to reform, among other things, the science of medicine. A number of Root-and-Herb Doctors, it seems, have combined together for this inconceivable purpose, and are about opening a Medical School in the city of New York! This is indeed a rare specimen of high life below stairs.—These gallant reformers cry not so much intrigue and corruption, as murder! "Mercury, the lancet, and the knife," they proclaim to be "evidently fatal to multitudes;" and against these three dangerous enemies they have waged an open war. Had these valiant doctors aimed only to reform the *practice* of medicine, their object would have been laudable, however ridiculous the measures they might take to accomplish it; but this purpose is altogether too contracted to satisfy the aspirations of great minds; the Root-and-Herb Doctors have undertaken to reform the *Science* itself, as if the great principles of Science

were capable of being reformed by them, any more than those of Natural Philosophy or Moral Government. The *modesty*, however, with which their object is set forth, is in perfect keeping with that displayed in other parts of the notice.

It seems by the above-mentioned notice, that this reform has been brewing about forty years, but nothing very permanent was effected until the year 1827, when an individual, overpowered by his wonderful development of the organ of benevolence, and tender-hearted withal and not over fond of filthy lucre, became deeply impressed with the murderous iniquity of all regularly-educated medical practitioners;—horror-struck with the waste of human life and happiness occasioned by the prescriptions of the learned, intelligent, and experienced members of the faculty, he “procured a lot of ground, and erected a handsome and convenient edifice, for an institution denominated. The United States Infirmary,” where the Science of Medicine might be reformed, and the Root-and-Herb system exclusively adopted. Adjoining this United States Infirmary, or Root-and-Herb Steepery, as it might with more propriety be called, “a large and commodious” edifice has been since erected for a Vegetable Medical School, which is to be opened, we are told, in November next.

At this SCHOOL OF REFORM are to be taught, in addition to the reformed doctrines, all the necessary branches taught at other schools; and yet things are to be so managed as that the student “may acquire a knowledge of both in less than one half

the time, and with half the expense, that is required at other Medical Institutions”! How this is to be effected we know not, unless it be by a species of enchantment, to be exercised, perhaps, by some magic *rod*.

But these redoubtable reformers do more; they guarantee *employment* to their pupils after they leave the school, and that too “with a generous compensation”!!

At the Root and Herb Steepery, “there will be no specified time to complete a course of study,” but when a diploma is given, it “will have a decided advantage over every other”!!! Bravo! It will doubtless throw the diplomas of Boston, New York, Philadelphia, and Baltimore, entirely in the back-ground; and as for those from the Universities of London, Paris, and Edinburgh, they will be mere brown paper compared to those from the Roots and Herbs. The reason of this is obvious. The former only indicate the qualification of a gentleman to assume the prerogatives of the profession; the latter do more,—they ensure him *employment*.

DR. GODMAN'S ADDRESSES.

DR. GODMAN, of Philadelphia, is about publishing by subscription a collection of Addresses delivered by him on various occasions; with an Appendix containing an explanation of the “Injurious Effects of TIGHT LACING on the Organs of Respiration, &c.”

This author is known as a person of uncommon merit, especially in the departments of Natural History and Anatomy. All his productions

bear the stamp of genius. It is to be expected that he will present in a strong light the facts connected with a subject interesting to the medical profession and important to the community.

The proposed Addresses will form an octavo volume. The subscription price is two dollars. A subscription paper is left at Mr. Carter's bookstore, corner of School Street.

SORE NIPPLES.

MR. NORTH, the scientific conductor of the *Medical and Physical Journal*, says he has found the following composition a very efficacious topical remedy for sore nipples:—

Take of Gum Arabic Powder, half an ounce;
Alum, five grains.

The alum, being reduced in a glass mortar to a fine powder, is to be well mixed with the gum arabic powder. This composition is to be applied to the parts affected, (previously dried by soft linen,) every time after suckling, by means of a camel-hair pencil. The nipple, after being covered with the powder, should be protected against the friction of the clothes by a shield of some kind,—many being in common use. The best we are acquainted with, is a short glass tube made expressly for the purpose, and sold by Mr. Charles White, Apothecary, in this city.

Dentition in an old Man, and Death in Consequence.—An old man of the age of 75 years, consulting Dr. Jahn, at Menington, told him that he was about to cut a new tooth, which was already bursting through the gum, and that this late dentition was hereditary in his family. On examining the mouth, the Doctor perceived an enlargement of the gum at the place of the last molar tooth, on the left side of the lower jaw, and further back a protuberance formed

by the new tooth. A short time after, the old man was attacked with a violent affection of the brain, under which he died. On examination after death, an inundation of watery liquid was found on the brain. The new tooth was extracted from the jaw: it was perfectly formed, but small, and had very short roots.

Eruption of the Measles on one Side only of the Body.—A child, from the time of its birth until it was a year old, had perspired on only one side of his body. This singular anomaly had disappeared under the continual application of warm baths. In an epidemic of measles, the child was attacked with that disorder, but the eruption only showed itself on that side of the body, which, from the beginning, had enjoyed the greatest share of vital activity.

Rust's Magazine.

New Mode of Vaccinating.—In the hope of rendering vaccination a more certain preservative against the attacks of smallpox, M. Jahn vaccinates his patients on the thighs as well as the arms, in such a manner as to produce from twenty-four to thirty-six pustules. The fever which succeeds to this operation is represented as very strong, but as never having been attended with grave or dangerous symptoms.

Hospital Reports.—In this Journal will henceforward be published, reports of interesting cases and operations which may occur at the United States Marine Hospital at Chelsea, as well as the Massachusetts General Hospital. These reports will be prepared by the Medical and Surgical Officers of these Institutions.

REPORT OF DEATHS IN BOSTON,

The week ending July 17, at noon.

Of croup, 1—consumption, 6—delirium tremens, 1—infantile, 2—intemperance, 1—liver complaint, 1—measles, 3—old age, 1—sudden, 1. Males, 9—females, 8. Total, 17.

OUR OWN AFFAIRS.

It has been suggested to us by several gentlemen that it would be an improvement in the plan of this Journal, if it were to come out only on the 1st and 15th of every month instead of weekly, and each number contain two sheets instead of one. It would appear, say they, more respectable.—We are fully of the same opinion; and have to add that such a change would very considerably lessen our editorial labors, and be a saving of expense to the publishers.

The *subscribers*, however, derive advantages from the present form and arrangement which seem to make it our duty to resist the temptation of a more respectable appearance. Advances in medical science are made known, not only more speedily than they would be by the proposed plan, but in quantities better suited to the short intervals of leisure enjoyed by medical practitioners, and the work comes to them at a *lower rate*. In its present form, the Journal pays only newspaper postage; if the other method of publication were adopted it would pay pamphlet postage, which is nearly double the amount for every sheet. If again it were covered, which would be in a manner necessary under such circumstances, the postage of still another sheet would be added, making the annual amount of postage alone to those who reside more than 100 miles from Boston, more than half as much as the present subscription price,—a consideration of no little importance to distant Subscribers,—an evidence also of the extreme cheapness of this Journal, as well as of the expediency of retaining its present form.

Feel ourselves obligated, therefore, although in opposition to our own private interest and wishes, to continue the present arrangement, and if any improvements are made, en-

deavor to make them, in the true spirit of the age, not external but *internal*.

THE subscriber, formerly agent for the Proprietors of the Boston Medical and Surgical Journal, having become the purchaser and sole Proprietor of this work, informs those who are indebted for the first volume, that immediate payment of their subscription has become necessary in order to the proper settlement of his accounts with the former proprietors. He therefore requests that upon the receipt of this notice, the amount due according to the bill sent at the close of the volume, may be transmitted.

JOHN COTTON.

BOOKSELLERS, PUBLISHERS, and AUTHORS, are informed, that by transmitting to the Editor, free of expense, a copy of such works as they may write or publish on subjects interesting to the medical profession, they will be entitled to a notice of such works in the pages of this Journal.

CARTER & HENDEE,

Corner of Washington and School Streets,

HAVE recently published and for sale, LECTURES ON ANATOMY, SURGERY AND PATHOLOGY, including Observations on the Nature and Treatment of Local Diseases—delivered at St. Bartholomew's Hospital, by JOHN ARBUTHNOTH, F.R.S.

ADVERTISEMENT.

The estimation in which the opinions of the celebrated teacher in the School of St. Bartholomew's is held, must render the present volumes invaluable to the student, while it will equally serve as a work of reference to the elder branches of the profession, containing, as it does, the views and opinions of one whose life has been spent in instruction, and whose talents and acquirements are no less admired than respected.

Nor is the value of the volume confined either to the medical tyro or the more experienced practitioner. The popular reader, from the plain, lucid and colloquial style of the Lectures, will derive both pleasure and instruction from the perusal, while the general contents yield a body of information not to be met with in works of this description, and which will render it in families a book of familiar consultation and reference.

July 28.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

THE BOSTON
MEDICAL AND SURGICAL JOURNAL.

Vol. II.]

TUESDAY, AUGUST 4, 1829.

[No. 25.]

I.

RESUSCITATION BY OXYGEN GAS FROM
APPARENT DEATH BY DROWNING.

Letter 1.—To the Editor.

Cambridge (Md.), March 31, 1829.

DEAR SIR,—At the close of my chemical amusements of this winter, an accident occurred which gave rise to an experiment whose result deserves, I think, to be classed among the subjects of your invaluable Journal. It is one on the efficacy of Oxygen Gas in an extreme case of Asphyxia.

A favorite young beagle hound had fallen into a neighbor's cellar full of water, and was drowned. How long he lay there, (which is a prominent point in the case,) can only be conjectured from the following facts:—He was heard flouncing and yelping in the waters; and the family believing he was a mad dog, did not venture in to his relief until their negro man returned from a ride of two miles, on which he had been sent shortly before the accident, when they supposed he had got out, as he had been long silent; but on searching, he found him lying dead under the water, and dragged him out. Finding it was my dog, he informed my servant, who obtained a wheelbarrow and brought him home, and then went in quest of me. When I arrived, with some gentlemen who accompanied me to witness

the experiment which I proposed, we found the dog's body and limbs so cold, hard, and inflexible, that, taking him by the feet, he was turned over as a block with four pegs attached to it.

Having at hand some jars of gases, and fortunately one of oxygen, which I had recently prepared for a similar experiment with smaller animals to be placed under asphyxia, from carbonic acid gas, but not having executed my design, I filled a large bladder with the oxygen, not diluted with any portion of nitrogen, because I wished to produce the greatest possible excitement in a case so desperate. I attached to the bladder a small brass stop-cock with a long beak, and infused into his lungs, by a violent pressure of the bladder, a copious dose of the gas; upon which he instantly made a convulsive and solitary yelp, to the full pitch of his usual and shrill voice in the chase. The dose was repeated with the same effect until the gas was consumed. He was placed by the fire in warm blankets, friction constantly applied, and a strong dose of diluted volatile ammonia forced into the stomach. His body and limbs became relaxed; his respiration short and rapid, with subsultus tendinum.

This experiment commenced at one o'clock, and at eleven that night he raised himself on his feet, and made a few feeble steps. The

next morning he left his bed in the kitchen, and walked to his kennel, a distance of fifty yards; but during the second and also the third day, he suffered under a total anorexy. I ordered an enema of sulphate of magnesia, and the following night tinct. opii eleven drachms. On the fourth day he took a small portion of meat; on the fifth and sixth days he showed the marks of excessive atrophy; in fact, his vital functions are restored, but I am candid to say, those of the animal will, I fear, never be fully regained.

I have been minute with this case, not from a belief that it is the first instance of the revival from asphyxia by oxygen gas, for I have read of one, and one only, and that arose from carbonic acid gas inhaled for experiment, by a Professor Higgins, in Europe; but I have never met with a case of recovery from apparent death by drowning. If any exist, they are rare, and it is certainly a subject worthy of attentive prosecution.

I have the honor to be yours, very respectfully,

JOSEPH E. MUSE.

In answer to a request that the history of the case might be continued, the editor received the following:—

Letter 2.

Cambridge (Md.), April 24, 1829.

Dear Sir,—In reply to your inquiry, I am gratified to be enabled to state that my experiment in the case of asphyxia has become more perfect. In the course of eight or ten days after my communication to you, the health of the subject began to improve rapidly, and his *appetite, repletion, and vivacity*, now indicate a thorough renovation of the animal functions; which

candor had compelled me to declare I did not then anticipate.

One other incident may be worthy of notice,—that his voice, which was naturally sharp and shrill, has astonishingly altered into the full and coarse, though his cough resulting from the accident, has, with every other symptom of disease, wholly disappeared.

Allow me to acknowledge my obligations for the respectful sentiments you have done me the honor to express in your last and on former occasions; which, in truth, I cannot too highly appreciate, as coming from the founder of a Journal which is dispensing the fruits of science to an ungrateful community, and which, though suffered to expire, will have erected, by its kindly influence on the moral condition of man, a monument imperishable.

I am, dear Sir, truly and respectfully yours,

JOSEPH E. MUSE.*

II.

ON THE CURE OF NEURALGIA IN GENERAL.

We reprint the following extract from Dr. Johnson's analysis of M'Culloch on Neuralgia, because it contains much practical light on a subject of universal interest. The increased frequency of neuralgic diseases of late years, has been already adverted to; the mode of treatment, therefore, which has been found successful by distinguished practitioners, cannot be made too generally known. We recommend the following remarks to the very particular attention of our readers.

* From Silliman's Journal.

IF our author be right in considering neuralgia as a disease dependent on a constitutional cause, however prominent may be the local symptoms,—in short, if it be a mode of intermittent fever, or fundamentally of the same nature, it is natural that the same system of treatment should be enjoined. To this he was led, more than twenty years ago, from theory, and is now confirmed in the propriety of the system by practice and observation. This plan of treatment has never failed him in recent cases, and has often succeeded in those which were of long standing. In this chapter, our author has been unavoidably led into considerable repetition, as the principles of cure, and even many of the individual remedies, have been broached or detailed in preceding chapters, more especially when treating of intermittent. It will not be necessary for us, however, to go much into the minutiae of the treatment; since it was of infinitely more importance to connect the etiology and pathology of these varieties of disease, than to dwell on their management when once recognized.

The first remark, and it is a very important one, is this,—that the neuralgiae often disappear without medicines, by a spontaneous effort of the constitution,—while they are also truly cured by circumstances that are not noticed, and to which credit is not given. This explains the reputation which has been gained by particular modes of cure, which were, in reality, either nugatory or injurious in themselves. Hence improper practices are continued from mistaken observations. Particular periods of life, as the climacteric in males, and cessation of the catamenia in females, often root out old and inveterate neural-

gic affections, that had defied all remedies. The most frequent of the real, though little observed causes of cure, however, will be found in change of air, and of general habits of life,—which, by the bye, is a direct remedy of great power, though often recommended to the patient when the practitioner is tired out with fruitless attendance. The effects of moral impressions are underrated and ridiculed. A change of physicians, or the acquisition of a new and strong confidence in a new and reputed person, often effects a cure where the remedies prescribed had little or nothing to do in the business.

“Hence an actual benefit often derived from empirical remedies and empirics, or from physicians of popular if false reputation, or of peculiar, perhaps insolent or coarse manners,—an influence extending widely over all the nervous disorders, of which so many occur from the general cause of disease which includes the subjects of this essay.” 370.

This, in reality, is the cure by charms. This is the reason why quack medicines,—the composition of which, being unknown, is more respected,—effect cures, when the same medicines fail in ordinary prescription.

“Hence that universal confidence in substances and formulæ, and numbers and quantity; and hence especially that enormous consumption of empirical remedies,—compounds found in every pharmacopœia, but divested of all their virtues under this form, because separated from the mystery and the incantation. The physician who attempts to reason with his patient on the effects and utility of his remedies, pays a most unmerited compliment to human reason;

and while he will fail to influence, he will not be very long in discovering that he will shortly have no patients to enlighten or to cure. With the loss of the mystery, the merit is at an end; and he who proves himself to be the true philosopher and physician, is precisely the man who will never be trusted." 371.

This is a melancholy picture, but we fear it is too true. It may account for the immense reputation of a living practitioner, who never reasons or says a civil word to his patients, but drives them from his presence, all having and all knowing beforehand, that they will have the same prescription or box of pills, whatever be the nature of the malady!* Dr. M. relates a case of tic douloureux, which he had long treated in vain with arsenic and other remedies, but which instantaneously vanished before the solemn gibberish of an old woman, celebrated for the possession of a charm against toothach.

We know that intermittents are sometimes cured by giving a powerful anodyne just before the expected paroxysm, which breaks the chain and interrupts the morbid process. The same is sometimes done in neuralgia, and ought not to be neglected, though they are not the real remedies in this class of maladies.

"But the chief and the most energetic remedies in neuralgia, be the form what it may, are the tonics; and of these, as in intermittent, the most efficacious are bark and arsenic. Each, in its class, may stand at the head of a list which it is fruitless to enumerate, since it is so well known to even every druggist; nor need I

* Abernethy, no doubt, and the blue pill.

repeat what relates to the mode of using these, since it is precisely the same as in intermittent fever. That there is any one vegetable tonic more efficacious than bark, or differing in the mode of action, as far as we now know these remedies and their powers, I am inclined to doubt, but not to deny that such do exist, since I consider that we are very far from having exhausted the medicines of the vegetable kingdom; so far, indeed, as rather to be in an absolute infancy of knowledge on this subject.

"While with bark as the type, the physician may command the whole range of astringents, aromatics, and bitters: he is also bound to try one where another fails; since thus may it possibly be discovered, even that what is most efficacious in common intermittents may not be most so in the neuralgiæ, differing as they do in respect to the local action in the latter. But as I can, on this subject, say nothing of any great value from my own experience, I must be satisfied with having pointed out the leading principle and the road to be followed; as I need, also, do no more than suggest those combinations, whether of these vegetable substances themselves, or of the same with narcotics, the occasionally superior value of which in intermittent is well known.

"If arsenic be admitted as the type of the metallic remedies, it is equally easy for the physician to command the whole range of these,—so well known, that I could add nothing respecting their powers,—while I much suspect that very fanciful values have often been attached to some of them, from that common mecha-

nical system which looks more to variety of medicines than to a knowledge of diseases. Much has indeed been lately said respecting the especial value of the carbonate of iron, as it is generally called, in the common Neuralgia (Tic); while in reality it has been administered as a merely empirical remedy, and without system. In my own experience, I had resorted to it long before these recommendations, both in intermittent and neuralgia, but without discovering that it possessed any collateral merit above arsenic, while far less generally efficacious as a remedy. But, on all these remedies I shall be very glad to hear of the experience of others, since I have wanted both temptation and opportunity to do them justice. As to the value of arsenic compared to bark, I can only repeat what I said formerly, that I have found it more generally efficacious in neuralgia, while it has appeared less so in intermittent; often acting almost like a charm on the pain, and even in cases of many years' duration. But on this also I am ready to be corrected; as I am satisfied that the experience of no one individual, even were it far greater than mine has been, is sufficient to decide on subjects of this nature." 377.

Dr. M. makes no distinction, as to treatment, in the different forms of the disease,—with the exception of sciatica, in which he has not had much experience. A medical friend, residing in a district noted for this disease, informs our author that he has derived the most marked advantage from this remedy in numerous cases.

When the attacks of intermittent or neuralgia are either very

irregular or of long standing, the power of medicine is very limited in breaking the chain of morbid action. A single bloodletting has often rendered a recent intermittent regular, though previously irregular; and Dr. M. suggests, but without having experience on the point, a similar experiment in irregular neuralgia, while he condemns the practice of repeated depletion. Mercury, pushed so as to affect the mouth, will sometimes render agues amenable to tonics, though previously rebellious. The same may be tried in the neuralgiae, since in both classes the glandular viscera are often deranged, and the mercury acts beneficially in correcting such disorders. But as the greater number of cases which present themselves are now chronic, and consequently inveterate; probably from the wrong treatment employed when they were recent, so the cures will be comparatively few, however judicious the remedies. It is not until the old cases shall have died off, and a generation of the same diseases has arisen under the improved practice, that a fair trial can be given to the latter.

One great cause of neuralgia becoming chronic, is the caprice or impatience of the afflicted. Anxious for a speedy cure, they are led away in succession by name after name, and recommendation after recommendation; the consequence of which is, that no steady system is pursued, and no cure effected. The work, half done by one, is reversed by another, till at length the patient is rendered sceptical as to the skill of the practitioner or the potency of the medicine.

But the paramount object is to

withdraw the patient, if possible, from the operation of the primary causes of the disease. On this account, the locality of his residence should be carefully examined, according to the rules which have been already laid down by the author in his *Treatise on Malaria*, and of which the reader will find ample analyses in this Journal. Without such removal from the sphere of the causes, no permanent cure need be expected. The dread of moisture should ever be in the patient's mind,—he should remove to a dry, but not to a cold situation, since cold itself is an exciting cause. The change of scene and air resulting from travelling alone, would often effect the cure, both in agues and the neuralgia.

“What remains as to the general treatment, relates to diet. As in intermittent, whether recent or chronic, I have no hesitation in saying that the usual full diet of persons in health, with a rational use of wine, forms an essential aid to the cure, and that it has often proved a cure in itself, when used as replacing the opposite and pernicious system. But I shall not enlarge on this; as the evils arising from low diet are involved in those belonging to the debilitating practice on which, even after all that I have said, I must offer some additional remarks hereafter.” 386.

Of the local remedies for neuralgia we need say but little. Dr. M., like Dr. Heberden, found blisters to aggravate the pain when placed near the nerve affected. What has been called a perpetual blister is still worse, as proving “almost always a positive aggravation, not only of the

local disease itself, but of the general irritation and disorder of the system.”

Dr. McCulloch's *local* treatment of this disease, which is given somewhat in detail, will be concluded in our number for next week.

HOSPITAL REPORTS.

Cases of Compound and Complicated Fracture, requiring Amputation. Reported for this Journal from the Massachusetts General Hospital.

CASE 1st.

MAY [29th, 1829.—Mr. H. M., aged 23, a painter, fell about thirty feet from a staging,—was taken up in a state of insensibility, and remained so for some hours. Was brought to the Hospital four hours after the accident. Could not then be made to notice without much effort;—he would scream out when moved suddenly.

On examination, the left femur was found fractured into several parts at its lower extremity. Some portions of the bone had been forced through the soft parts, accompanied by considerable hemorrhage. The right wrist was much swollen, and very painful on motion. About the left eye and extending to the temple, was considerable ecchymosis. No other marks of injury could be found about the head. The trunk appeared very well. On each leg was a large and old ulcer. The patient was exceedingly stupid, and much inclined to sleep: he would start suddenly at times, as if altogether unconscious of *action* or *situation*. Pulse small and feeble; scarcely felt at the wrist; extremities cold; a sallow pale-

ness was over the whole body. Endeavors were made to retain the bone in a comfortable situation. Wine, brandy, and water, were freely administered. Habits intemperate.

30th.—Reaction began to take place about 8, P. M., yesterday. Was very restless during the night, requiring force to keep him in bed. Took lemonade, water, &c., during the night. This morning, pulse full, quick, but not strong. Took a little gruel. At 11, A. M., Consulting Surgeons convened, and advised immediate amputation. Preparations were made, and in a very short time the patient was ready in the theatre for operation. He seemed to be unconscious of what was to be done, and inclined to sleep.

Operation by Dr. Warren.

The artery was compressed in the groin, and the thigh amputated by the circular operation. Two ligatures were applied, and the patient removed to be dressed in his ward. Lost but very little blood.

31st.—No after-hemorrhage from the wound. Stump was dressed with adhesive straps, &c., and has remained well. Pulse quick, and somewhat full; was very restless during the night; discharge of urine involuntary, accompanied with excruciating pain, but not tinged with blood; bowels costive; mind wandering at times; some involuntary motion of the muscles about the face; eyes wild.

R. Infus. Sem. Lin. ʒvi.

Spts. Æth. Nitrosi, ʒi. M. rep. quaq. hor. 2da.

Enema Commune.

June 1st.—One dejection yesterday after enema; dysuria con-

tinues; slept but little last night; in almost constant motion, throwing himself from one side of the bed to the other.

2d.—Has had no dejection since the 31st of May. Wound dressed to-day; ligature came away; no hemorrhage; discharge thin and foetid; general want of action. Enema commune to-day.

3d.—Pulse small; very weak; appetite wanting; disposed to be comatose; very restless at times; dysuria less. May have two glasses of wine daily.

R. Quin. Sulph. gr. ij., in Pil. quaq. hor. 2da.

7th.—Very restless; delirium at times; diarrhœa since yesterday. Omit pill. Wine whey three gills, three times daily.

R. Tr. Opii, gtt. xv. Ev. hr.

till diarrhœa be checked.

8th.—Wound shows no great disposition to heal; diarrhœa ceased; now pain in the abdomen; dysuria continues to annoy at times. Omit opium, and apply fomentations over the bowels.

10th.—Better: mind less wandering; less disposed to sleep; pain in the abdomen subsided; wound appears more healthy.

11th.—No dejection.

R. Tr. Rhei, ʒss. statim.

13th.—Improving in all respects. Omit Spts. Æth. Nitrosi.

14th.—Answers questions understandingly. May have milk porridge.

15th.—Appetite good; stomach and bowels regular; wound healing.

17th.—May have broth.

18th.—Pulse 90; wound discharges much.

R. Pulv. Cinch. ʒi.

Tr. Ejuodem. ʒss. M. ter in dies.

22d.—Costive; complains much of the right wrist.

R. Tr. Rhei, 3ss. every four hours.

23d.—Six or seven dejections, with relief. Opiate if needed.

24th.—Discharge from the wound much diminished; yesterday P. M., had a severe chill, with nausea; got an emetic, and vomited much foul matter; tongue still coated. Omit Tr. Cinch: and bark; take wine whey, wine and water. Drink balm tea.

25th.—Wound nearly closed, but discharge scanty, flaky, and very foetid; surface of the wound smooth, and covered with a substance like coagulated albumen. Apply poultice at night.

26th.—Discharge much more copious, but exceedingly foetid and flocculent. Complains much of pain and stiffness in the shoulder. Wash the wound with Solution of Chloride of Lime.

29th.—Right wrist very painful; much swollen; appetite gone; emaciation great. Fomentation of bitter herbs to the wrist.

30th.—Fails rapidly.

Brandy, 3ss. every four hours.

July 4th.—Mind wandering; great tremor of the hands; convulsive twitching of the muscles of the face.

6th.—Gradually sinking.

9th.—Died. On examination of the wrist, a large quantity of pus issued; perhaps 3 viij. The capsular ligament of the wrist was found ruptured behind; the radius and ulna were thrust backward. The os scaphoides and os cuneiforme were broken in halves; a small portion separated from the os lunare, and the styloid process from the ulna. The fragments were disjunct from the

radius and driven forward, lying before the remaining halves of the bones. The whole appearance was as if a blow with an instrument half an inch in width, had been directed transversely across the wrist.

The remaining leg lay upon the side with the toes pointed inwards, and could not be reduced; appearing as if dislocated at the hip joint. Being examined as to this, the head of the bone was found in its place, the round ligament in an eroded, ulcerated state, and the capsular ligament filled with pus.

CASE 2d.

May 15th, 1829.—James Downey, an Irish laborer, aged 27, while scuffling with his comrades, tripped and fell among some timber that was near at hand. He was taken up and brought to the Hospital immediately, where he was examined. The tibia was found fractured nearly transversely, about six inches below its head, and quite a large opening through the soft parts communicating with the fractured ends of the bone. The hemorrhage at the wound was considerable. The fibula was not broken. The patient was very stout and muscular, constantly in the habit of using ardent spirits very freely. The limb was placed and supported upon a pillow; the hemorrhage soon ceased, and an evaporating lotion was applied. *Internally* was ordered the following:—

R. Spt. Æth. Nitrosi, 3ss.

Tr. Opii, 3ij. M.

Cujus, gtt. xxx. Sum. quaq. hor. tertia.

16th.—Was very restless fore part of the night; dragged the

limb out of place, and produced bleeding; toward morning became more quiet. Pulse 84 and full; vessels of conjunctivæ loaded.

R. Sol. Mag. Sulph. ʒiv. Si opus sit, dos. repetet.

12th.—Patient quiet; slight hemorrhage yesterday P.M.; cathartic operated.

20th.—Leg very much inflamed, and covered with phlyctænæ about the wound. Mind wandering; constant motion and muttering in sleep.

Applic. parti affect. Hirud. No. xx. postea cataplasma commune, et sœpe repetetur.

May have brandy and water, with Tr. Opii pro re nata.

24th.—Constitutional symptoms less urgent; inflammation subsided; discharge rather copious from the wound, thin and bloody; ulceration extending. Patient drinks much; perspires freely; has no appetite; pulse frequent and feeble; bowels costive.

R. Ol. Ricini,

Tr. Rhei, aa ʒss. M. post operat.

R. Ammon. Carbonat. gr. v., et rep. quaq. hora quarta.

Continue brandy and laudanum as circumstances may require.

27th.—Sinking; yesterday, copious flow of arterial blood from the wound; was arrested by compression of the femoral artery; mind rather more tranquil. Continue stimulants and antispasmodics.

29th.—No hemorrhage since the 26th; seems a little more comfortable; mind more active and less confused; less muttering in sleep; large slough separating from around the old wound.

31st.—Yesterday slough came away; copious hemorrhage fol-

lowed; patient has sunk in consequence; pulse 104 and feeble; takes but little nourishment.

June 2d.—A consultation of the Hospital Surgeons was held today, and amputation advised as the only possible course that promised anything to the patient. Has had no more bleeding; continues stimulants, &c., with broth and beef-tea.

3d.—Operation by Dr. Otis, at 5, P. M.—The artery was efficiently compressed at the groin, and the limb removed from above the knee by the circular mode of operating. Two ligatures were applied, and not more than three ounces of blood lost during the whole operation. The wound was dressed in the usual manner, and no hemorrhage followed.—At 7, P. M., was visited. Patient seemed very stupid, and scarcely could be aroused; was bathed in a clammy sweat; hands cold; pulse very feeble at the wrists. Drank some warm brandy and water. Efforts were made to produce reaction in the system, but without effect; he continued to sink quite gradually, and at 9, P. M., expired.

The limb, after it was removed, was examined. A large quantity of purulent matter was found imbedded among the muscles; the soft parts, for a considerable distance, were clearly separated from the bone. The body was examined post-mortem, and no marks of disease found.

CEDEMA OF THE GLOTTIS

Successfully treated at the Hospital at Nantes.

PETER BURGON, aged 46 years, entered the Hospital of Nantes on the 29th of December. Four days pre-

viously he had been exposed to a current of cold air, while in a state of perspiration, soon after which he was seized with sore throat and difficulty of swallowing, followed by a sense of burning heat along the trachea, and constant cough. The oppression, difficulty of breathing, glairy expectoration, &c., increased, and when he entered the hospital he was in a very dangerous condition,—each inspiration being effected with great labor. His face was of a violet color,—pulse hard and full. The alum insufflation employed twice.

[See below.] It caused some irritation at first, and much cough, during which he inhaled with considerable difficulty. Afterwards the breathing became more easy,—he was nearly seven hours without coughing, and the night was passed in comparative tranquillity. The insufflation was practised every day till the disease yielded. Very few other medicines were employed,—none of any efficiency. Expectoration came on about the fourth day after he was received, and then the symptoms became much mitigated.

SKETCHES OF PERIODICAL LITERATURE.

ALUM INSUFFLATION.

THE insufflation of finely powdered alum is recommended by Laennec as having been very successful in *Angina Pellicularis*. This name has been recently given to all those inflammations about the throat, in which false membranes, as they are commonly called, are thrown out, so as to diminish the calibre of any of the air passages. Even in Cynanche Tonsillaris, the practice recommended is capable of subduing the disease more speedily than any other.

NOTICES IN PATHOLOGY.

UNDER this head, four interesting cases are related by Dr. Geo. B. Wood, in the last North American Journal. In the first, the patient, an active intelligent boy, about three years of age, was attacked somewhat suddenly with a partial paralysis of the lower extremities, accompanied with some anomalous symptoms. On attempting to walk, he moved forward with a tottering step, in a di-

rection constantly inclining toward the left side, for a short distance, and then fell. In the sitting or standing posture, his head had a similar inclination to the left shoulder. His intellect was somewhat impaired, and his sense of hearing less acute than usual. These circumstances, and the recollection of M. Homens' observations in regard to cerebral affections, directed the suspicions of Dr. W. to the cerebellum. These were confirmed in the course of the next day by the patient complaining of severe pain behind the left ear. Recourse was immediately had to local bleeding, blistering, &c., and in three days afterward the boy recovered.

The second case affords an example of the consequences which follow upon repelled eruptions. A gentleman, æt. 70, was attacked with erysipelas of the face, which extended downward so as to cover a considerable portion of the anterior part of the chest. The part thus affected

was treated with solution of corrosive sublimate, which at once relieved the erysipelatous inflammation, but was followed by swelling and induration on the left side, and symptoms of prostration. A blister was applied to the breast and tonics administered, but without avail; the patient died on the fourth day.

The third and fourth were cases of cerebral disorder; the first with symptoms resembling apoplexy, the last of a convulsive character,—both induced by gastric oppression, and relieved principally by vomiting.

THE FŒTAL CIRCULATION.

Dr. J. R. COXE, in the same Journal, maintains the doctrine of a direct communication between the uterus and the placenta, by means of the bloodvessels, without any intermediate structure. This doctrine is supported by many distinguished anatomists, some of whom,—viz., Cooper, Vieussens, and Haller,—have confirmed it, as they think, by the aid of injections. Similar injections were attempted by Dr. Mouro, who reports them as having proved unsuccessful. Dr. C. considers the question as interesting in a physiological point of view, though practically unimportant.

A POWERFUL DISCUTIENT.

A YOUNG woman applied to the Surgeon of St. George's Hospital to have a tumor taken from her. It was hard, encysted, the size of a marble or larger, and situated at the outer corner of the right eyelid and superciliary ridge of the frontal bone. It had existed about three months, and increased rapidly.

The morning of the day on which it was to have been extracted, she accidentally received a violent blow on it, and at noon it was found soft, fluctuating, free of pain, and nearly dispersed. She was directed to wait a fortnight and see the result of this accident, which was doubtless a perfect cure, since she did not after make her appearance.—May not the Surgeon derive a practical lesson from this case? Does it not involve a principle which has given a certain degree and kind of reputation to quacks and professed bonesetters and callus breakers?

STEM OF A TOBACCO-PIPE EXTRACTED FROM THE URETHRA AND BLADDER.

A CASE is recorded in the London Medical Gazette, of a person 54 years of age, who had been subject for years to an occasional stoppage in the urinary passage, after exposure to cold, &c. One night as the fit came on him in a state of intoxication, he being unable to find his catheter, seized a common tobacco-pipe and passed the stem into the bladder. The urine flowed freely through it, and he was relieved. On withdrawing the pipe, it broke, and about four inches of the stem remained in the urethra. Much pain and tension was experienced in the perineum; and on introducing the finger per ano, the stem was felt projecting into the bladder.

All attempts to remove this body by forceps were unavailing, and it was at last withdrawn through a hole cut into the urethra anterior to the bulb. The wound healed readily, and no bad consequences ensued.

ISCHURIA

In which Urine was passed by the Umbilicus.

UNDER this title is reported, in the London Medical and Physical Journal, a singular case, which occurred in the Worcester Infirmary, in a female patient, aged twenty-three. In consequence of exposure to cold during menstruation, symptoms of abdominal inflammation came on, together with suppression of urine. For eighteen days no water was passed by the natural efforts, and the quantity secreted seemed gradually to diminish, until none could be obtained by the catheter. At this time a bloody discharge appeared at the umbilicus, which afforded some relief. On the 23d day urine began to be discharged at the umbilical outlet, but ceased to be so on the 26th. Five days after, six ounces of urine were drawn off by the catheter; and in an hour, two quarts of the same appearance gushed from the umbilicus. This discharge now continued for three days, and then ceased during the same time, no water in the mean while being passed through the urethra. On the 38th day, two quarts of water flowed from the umbilicus, and this was followed by instant relief. For eight days there was little variation; no urine could be obtained from the urethra, but it passed daily from the umbilicus. At length, on the 46th day, four ounces of urine were drawn from the bladder. The discharge by the urethra now daily increased, and that from the umbilicus lessened. There was

also a gradual amelioration of the symptoms; except that vomiting, which she had had from the beginning, still continued obstinate. The bladder was regularly emptied by the catheter for more than a month, after which time she began to pass some urine, and the power over the organ was gradually restored. She slowly recovered her general health, and menstruation was reestablished.

This remarkable and interesting case presents several subjects for physiological and pathological investigation. The great point to be determined, however, is, by what means the urine was conveyed to the umbilical orifice. Did the urachus become a pervious canal, and permit the water to pass through it from the bladder? or was the fluid secreted in the peritoneal cavity, and an opening made by ulceration in the thinnest portion of its parietes? The circumstance of the bladder being found empty for so long a period before the vicarious discharge, renders the former supposition very improbable. We must therefore suppose it to have been a real metastasis, similar in its nature to those rare cases which have been recorded among the medical curiosities of other countries, and to the remarkable instance which occurred in a neighboring state three years ago,—a case, some account of which may be found in this Journal, Vol. I. No. 3, under the title of *Paruria Erratica*, and which has scarcely yet terminated its progress through the journals of Europe.

BOSTON, TUESDAY, AUGUST 4, 1829.

CONVERSATIONS ON THE ANIMAL
ECONOMY.

AMONG the circumstances which distinguish the present age from those which have preceded it, certainly not the least remarkable is the effort which is making to diffuse science among all classes of the community. Those branches of knowledge which formerly were limited to a favored few, have within a few years become, through the medium of lectures and popular publications, to a certain degree attainable by all. A large class of works tending to this object, have been written for the avowed purpose of instructing children, but in a manner calculated to render them highly useful to adults whose attention has not been turned to the subjects of which they severally treat, and to whom it is desirable to obtain some general information on these topics. Thus we have *Conversations on Chemistry*, *Conversations on Political Economy*, *Conversations on Natural Philosophy*, and *Conversations on the Animal Economy*. The last is the title of a work published not long since in London, and which we believe has not been reprinted in this country. Its object is to render the most important facts in physiology familiar to the comprehension of the general reader, whose pursuits have not been of such a nature as to lead him into this sphere of inquiry. A juvenile work it certainly is not; since the subjects of which it treats, and the manner in which they are explained, alike render it unfit for

youthful readers. It is less calculated for a school-book than the analogous work of Paley; while to the general reader, and to young persons who have acquired some previous education, it will prove a much more agreeable and more useful work. As is the case with many works of the class, it is a conversation only in name; the individuality of the personages is sacrificed to the animation of the dialogue, and the junior speakers make suggestions and propose solutions of difficult points, with a degree of ingenuity which, even in an adult ignorant of the subject, would be somewhat marvellous.

The work is divided into twenty conversations; in the course of which are considered the integuments of the human body; the varieties of mankind; the bones; the muscles; the brain and nerves; the organs of sense; the digestive function; circulation; respiration; animal heat; growth and decay. All these subjects are treated in a manner extremely suitable to the purpose aimed at, in language divested as much as possible of technical terms, and wholly free from anything which could wear even the semblance of indelicacy.

In the conversation on the varieties of the race, is introduced the much agitated question as to the cause of the great diversity among mankind, springing, as we suppose them to have done, from a single pair. This question is so involved with the first principles of religious

faith, that we wish the author, in a work designed for a class of readers greatly exposed to the influence of sceptical doctrines, had made a point of placing the answer on clearer and more decided ground. According to the author, any peculiarity of form which is born with an individual, is capable of being transmitted to his offspring; but those which are produced by art or accident, are limited to the individual himself, and do not become hereditary. In proof of this last position, it is mentioned that the flattening of the heads among the Caribs, and the contraction of the feet among the Chinese, require to be repeated on every individual in order that the fashion may be kept up. Both the facts and the inference, however, are denied by some of the most distinguished physiologists of the day; while, on the other hand, there are facts equally striking and better authenticated, which lead to a precisely opposite conclusion. Perhaps our author's admiration for Mr. Lawrence led him into too hasty an adoption of his views on this point. At all events, we regard it as unfortunate that, in a work designed for popular use, a question affecting the credibility of revelation should have been discussed, without allowing to the arguments on the side of truth, the degree of preponderance to which they are justly entitled.

Under the head of organs of sense, are noticed the curious views of Dr. Wollaston in regard to the direction of the eyes; and a plate is given in which the same eyes which form part of a devotional head, and seem strongly to express this character,

are made to adapt themselves to the upper part of another face, where they appear at once to have a different direction and to express opposite emotions. Dr. W.'s experiments on this subject have not, we believe, been incorporated into the standard works of the day, and their adoption into the present was, therefore, peculiarly fortunate. We may also mention that under the general subject of the brain and nerves, cranio-logy comes in for its share of attention; and the arguments by which this doctrine has been maintained on the one hand, and attacked on the other, are stated with great clearness and sufficient impartiality. On the whole, we are disposed to think highly of the work as a popular manual, and hope shortly to see it make its appearance in an American edition.

QUACKERY.

WE have understood that there is on foot a petition to the Massachusetts Legislature, for a repeal of the Act by which irregular practitioners of medicine, or in other words Quacks, are deprived of the right of legal process for their fees. We have not seen the paper, and it was merely by accident the report reached us. If it be true, we can find no language strong enough to express our surprise and indignation. Is it possible that an individual who has sense or education enough to draw up a petition, could be found willing so far to degrade himself and human nature, as to engage in so disgraceful a transaction? For hire indeed, some men will do deeds of darkness, when they can be assured their own names

will never come to light;—but is it possible that an individual can be found in this age of the world, so dead to all sense of what he owes to himself, his family, his friends, and society,—so dead to all sense of common decency, as to put his *name* to a petition such as we have alluded to? We cannot believe it possible. If, however, we prove to be in error—if men of common respectability join in this attempt to open the doors of the poor and ignorant to the imposition of the Charlatan and the wretchedness which follows his footsteps, we can assure them, *first*, that in no civilized country is there a legislature weak or wicked enough to grant a petition which thus gives a direct and express sanction to quackery; and *second*, that their own names will be ever after associated with those of the impostors they encourage: the public will ask no further evidence of mental imbecility—no further cause to reject them from its confidence.

Malignant Sore Throat.—Dr. Guimier, a physician of some eminence, residing in the Commune of Vouvray, has published several cases of malignant sore throat, (*angina maligna*), in which the topical application of lunar caustic proved highly beneficial. The tonsils, the uvula, and the pharynx, were covered with membranous concretions of a grey-white or yellow color, and this collection was sometimes so thick and abundant about the larynx, as to impede respiration. The inflammatory action was frequently extended to the membrane lining the windpipe; and previous to the adoption of this mode of treatment, many patients were suffocated by the tenacious collection blocking up the glottis. The hydrochloric acid had been used with

success in a few cases; but Dr. Guimier, after a fair trial, gave the lunar caustic a preference, because the eschar it produced was limited to the part to which it had been applied, while the effect of the acid spread to the contiguous parts, often to a considerable extent. Even when the disease had spread to the internal membrane of the windpipe, Dr. Guimier found the lunar caustic, applied to the tonsils, &c., to produce a very happy effect.—The lunar caustic has been long a favorite topical application with some eminent surgeons of London, in chronic ulceration of the tonsils &c., which frequently follows the continued use of mercury, in affections termed pseudo-syphilitic; and we have frequently witnessed its beneficial effects in such cases, after detergent and alterative gargles, with attention to the general health, had failed to produce any essential benefit.—*Gaz. of Health.*

Malposition of the Kidney.—On examining the body of a man who died of pulmonary consumption, the left kidney was found, after searching for it with much diligence, *at the brim of the pelvis*. It was lying on the psoas muscle, appeared to have no renal capsule, and was twisted round upon itself so that its notch looked outward to the crista of the ilium. From the notch an ureter went out, which turned down over the brim of the pelvis to reach the bladder. The kidney was smaller than the other, and received its supply of blood in part from the external iliac artery, on which it lay.

This is a rare misplacement, and in some surgical operations would have produced much confusion and inconvenience.

REPORT OF DEATHS IN BOSTON,

The week ending July 25, at noon.

Of apoplexy, 1—accident, 1—childbed, 1—dropsy on the brain, 2—dysentery, 1—dropsy on the chest, 1—drown, 1—intemperance, 1—liver complaint, 1—measles, 5—old age, 1—palsy, 2—suicide, 1—unknown, 3. Males, 11—females, 11. Total, 22.

ADVERTISEMENTS.

HARVARD UNIVERSITY.

MEDICAL LECTURES.

THE MEDICAL LECTURES in Harvard University will begin in the Massachusetts Medical College, Mason-street, Boston, the third WEDNESDAY in October next, the 21st, at nine o'clock, A. M. Anatomy and Surgery, by Dr. WARREN. Chemistry, Dr. WEBSTER. Midwifery and Medical Jurisprudence, Dr. CHANNING.

Materia Medica, Dr. BIGELOW.

Theory and Practice of Physic, Dr. JACKSON.

Students attending the Medical Lectures are admitted, *without fee*, to the Surgical Operations and Clinical Practice of the Massachusetts General Hospital, during the course.

Aug. 4. W. CHANNING, *Dean*.
sept Oct 21.

BERKSHIRE MEDICAL INSTITUTION.

THE Annual Course of LECTURES will commence on the first Thursday in September, and continue fifteen weeks.

Theory and Practice of Physic by H. H. CHILDS, M.D.

Anatomy and Physiology, J. D. WELLS, M.D.

Medical Jurisprudence, S. W. WILLIAMS, M.D.

Theoretical and Operative Surgery, S. WHITE, M.D. and S. P. WHITE, M.D.

Materia Medica, Pharmacy and Obstetrics, C. B. COVENTRY, M.D.

Chemistry, Botany, Mineralogy and Natural Philosophy, C. DEWY, M.D.

Matriculation ticket, \$ 3. Fee for Lectures, \$ 40. Library ticket, \$ 1. Graduation, \$ 15.50. Board, including washing, lodging and room, \$ 1.75 a week.

Pittsfield, July 22, 1829. aug 4 sept 130

CARTER & HENDREE,

Corner of Washington and School Streets;

HAVE recently published and for sale; **LECTURES ON ANATOMY, SURGERY AND PATHOLOGY**, including Observations on the Nature and Treatment of Local Diseases—delivered at St.

Bartholomew's Hospital; by JOHN ARNETHY, F.R.S.

ADVERTISEMENT.

The estimation in which the opinions of the celebrated teacher in the School of St. Bartholomew's is held, must render the present volumes invaluable to the student, while it will equally serve as a work of reference to the elder branches of the profession, containing, as it does, the views and opinions of one whose life has been spent in instruction, and whose talents and acquirements are no less admired than respected.

Nor is the value of the volume confined either to the medical *tyro* or the more experienced practitioner. The popular reader, from the plain, lucid and colloquial style of the Lectures, will derive both pleasure and instruction from the perusal, while the general contents yield a body of information not to be met with in works of this description, and which will render it in families a book of familiar consultation and reference. July 28.

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THE BOSTON
MEDICAL AND SURGICAL JOURNAL.

VOL. II.]

TUESDAY, AUGUST 11, 1829.

[No. 26.]

I.

Communicated for the Boston Medical and Surgical Journal.

History of an Asphyxia from falling into a Privy, successfully treated.

By JOHN C. HOWARD, M.D.

SUNDAY, July 26th, 10, A.M.—Had an urgent call to see a child of one Mrs. O'Neal, a little girl, two years of age. She had fallen into a privy, and there remained, as the parents supposed, five minutes, and had been out as long when I saw her. She had been cleansed, and was to all appearance dead. On close examination, however, a slight motion of the respiratory muscles was observed; there was nothing like vital heat, but on the contrary a death-like coldness; the whole body had a moribund look; the lips were livid, the eyes closed, the abdomen tumid,* and the extremities of a bluish cast,—all of which indicated a stoppage of circulation. The very slight motion observed in the respiratory muscles, determined me to do all that I could for resuscitation, in which process I was assisted by Mr. Dwight, a medical student.

Friction with strong Tincture of

* The tumescence of the stomach and bowels arose, no doubt, from the presence of sulphuretted hydrogen, which, even when largely diluted with air, is considered by Orfila a very strong poison, utterly deleterious to animal life.

Cantbarides was resorted to, and used principally over the chest and abdomen;—before the tincture, however, could be procured, friction was applied with flannel wet with N. E. Rum, which is generally found at hand! These applications, together with bottles of hot water to the extremities, seemed to excite the capillaries and induce evident signs of life,—evinced in the muscles of respiration, and by the occasional act of coughing.

It was at first difficult to say on what the asphyxia depended,—whether it proceeded from the gas evolved in the vault, or from the feculent matter taken into the stomach. On learning from the father that the child, when he reached her, was immersed to the depth of three feet, so that he had great difficulty in finding and bringing her out, the case was regarded as analogous to one of drowning, and it seemed proper to bring about speedy vomiting, in order not only to evacuate the stomach, but to rouse the whole system to some vigorous action. An emetic of Sulph. Zinc and Ipecacuanha was accordingly prescribed. It soon operated; the child was very much relieved; and, after vomiting freely, cried stoutly, and appeared entirely out of danger at 12, M. She was seen in the evening by Mr. Dwight, quite sprightly, up and running about.

Boston, August, 1829.

II.

INFLAMMATORY DYSPEPSIA.

Practical Observations on the Nature and Treatment of this Disease.

In the Midland Reporter is a paper of much practical interest on this subject, by Dr. Malden, of Worcester. We cannot better communicate its contents to our readers, than by extracting from the London Medical Gazette the following abstract of it.

THE symptoms of chronic inflammation of the mucous membranes of the stomach, are often confounded with those of simple digestion. These are acidity, flatulence, and uneasiness of the stomach after eating; amounting, generally, to pain more or less acute and dangerous in its duration. In general it may be inferred, that the nearer the inflamed portion is to the cardia, the sooner the pain is felt after eating. Often the appetite is good; frequently there is a longing for those articles which the patient knows, from experience, would cause him the most uneasiness. In some cases there is constant uneasiness of the stomach, and sometimes there is tenderness of the epigastric region, upon pressure. If vomiting, preceded by uneasiness, or pain at the stomach, be of frequent occurrence, there is reason to suspect the commencement of serious mischief in that viscus. Wasting, if it be steady, however slow, is a very serious symptom.

The author has repeatedly observed, that the suspension of sympathetic headachs has been followed by organic disease of the stomach. Sometimes the atrophy is fatal before the organic lesion is of great extent. Often ulceration perforates the stomach,—occasionally the changes which take place

have the character of carcinoma. The morbid sensibility of the stomach, in these cases, is greatly augmented when the diseased structure ulcerates; and there is then an aggravation of the constitutional symptoms.

An accidental error in diet may produce a state of the mucous membrane which will either assume the character of acute gastritis, or go on more slowly.—A young lady, in good health, ate some threshed wheat. She felt considerable uneasiness at her stomach for several days afterwards; her bowels were bound, and her appetite impaired. She took, by the advice of a medical friend, some strong opening medicine, which relieved her at the time. Six months from the time she ate the wheat, she very often vomited, generally within an hour after her meals: her appetite was good, but she was afraid to eat. She felt a dull pain in her stomach after meals, a little to the left of the linea alba. The tenderness on pressure at this part was very trifling; but the cartilage of the rib immediately above it was very tender when pressed. The tongue was furred in the middle with a tenacious white mucus; the edges were clean, pale and moist; countenance pale and languid; the pulse 80, small, but not hard; bowels generally rather bound. She was directed to live exclusively on milk, milk and water, and gruel; to apply six or eight leeches, every second or third day, to the epigastric region, and to take a dose of the following mixture early in the morning, occasionally:

R. Magnesiae Sulphatis 3vi. Magnesiae Carbonatis 3iss. Mannae 3ss. Aquae Menthae viridis Oss. Dosis sit Cochlearia Magna iij. cum pari mensurâ aquae fontanae mista.

Upon this plan of treatment the symptoms soon disappeared, and the author regards the case as one of inflammation of a portion of the stomach.

Another variety of dyspepsia is thus described.—“Some individuals have repeated attacks of inflamed tonsils, pharynx, sneeherian membrane, or larynx, dependent on the coexistence of chronic inflammation of the mucous membrane of the stomach. In these persons, pain and uneasiness in the epigastrium, and an increase of habitual dyspepsia, precede the appearance of the catarrhal symptoms, and the latter often occur independently of any exposure to cold. If, in the treatment of this kind of cases, the attention be directed chiefly to the removal of the epigastric pain and tenderness, and by judicious diet to obviate gastric irritation, and the consequent dyspepsia, the catarrhal symptoms speedily give way.”

Dr. Malden has seen much mischief result from the injudicious use of mercury, which, with some patients, disagrees in any dose or form. The mildest preparation of mercury is the hydrargyrus cum creta, and sometimes we can, with propriety, only prescribe this.

“From long observation, (says our author,) I am convinced that the union of ipecacuanha, or antimonial powder, but in particular ipecacuanha, with blue pill, enables us to produce more decided effect on the liver than we could by blue pill alone. The advantage of this is very great; for the blue pill may be gradually reduced, and at length entirely omitted in the preparation, and the healthy secretion will continue under the

sole exhibition of ipecacuanha. There is not a fact in the practice of medicine, of the truth of which I am more satisfied than I am of this, and I have found a knowledge of it exceedingly useful.”

Another medicine of which our author speaks highly, is the subborate of soda. He was first led to the trial of it by reasoning upon the salutary effect it has on aphthous ulcerations of the mouth and fauces, when used as a gargle. Dr. M. gives from ten grains to half a drachm of borax, in solution, three or four times a day, and sometimes adds one or two drops of laudanum to each dose.

The following remarks on the pulse deserve attention:—“The pulse, in this form of the disease, is not always hard, and often is not much accelerated, and yet the judicious treatment of the malady is strictly antiphlogistic; the local morbid sensibility alone being sufficient to indicate the propriety of this practice, and the successful issue of the cases so treated confirming its correctness.

“Speaking from the results of my own experience, I should say that if the symptoms or the state above described, were attended by an uniformly hard and quick pulse, the commencement or progress of serious organic change, or the spread of the inflammation to the serous membrane, ought to be apprehended as the consequence.

“The pulse is always hard in cases of scirrhus pylorus; to this I do not remember an exception, and in all cases where organic disease had involved the whole of the gastric tunics, the pulse has been hard. An uniformly hard pulse, particularly if attended by

wasting, is the worst symptom the dyspeptic can present to his physician. Perhaps it may be objected that I have confounded irritation of the mucous membrane of the stomach with inflammation of it, and that many of the symptoms of the cases I have described, might exist without the actual presence of inflammation. To this I answer, that theoretically it is very difficult to define the exact point where irritation ends and inflammation begins; that irritation always produces an increased afflux of blood to the part irritated, which is certainly the first visible change in the inflammatory process; and lastly, that practically the distinction is not of so much importance as many practitioners imagine, since the antiphlogistic treatment is adapted to both states."

III.

PULMONARY CONSUMPTION.

The following remarks on Pulmonary Consumption, are from the pen of Mr. John Tuson, Surgeon, London.

HAVING found the practice usually adopted in consumption of the lungs, not only to prove inefficacious, but evidently to accelerate its fatal termination, I have long abandoned it, and for many years have adopted a treatment calculated to support the powers of the system and to correct the constitution. In most cases I have arrested the progress of the disease and prolonged the lives of the patients; and in two cases, attended with what may be termed its characteristic symptoms, as purulent expectoration, colliquative perspiration, hectic fever, emaciation, &c. &c., my plan has com-

pletely succeeded. Actuated by the desire of employing means to cure such patients, instead of *quieting* symptoms, which every medical man should have in view, I have latterly given the iodine, combined with the solution of the acetate of morphine, (proportioned to the extent of the attendant irritation,) an extensive trial; the favorable results of which have fully satisfied my mind that the disease is more under the control of medicine than practitioners generally imagine. In the early stage, when the lungs are in a state of inflammatory excitement, with a view to prepare the system for the administration of the iodine, I prescribe the nitrate of ammonia, and attend to the state of the alimentary canal, &c. And here I beg to observe, that when there are tubercles in the lungs, or the patients are of a scrofulous habit, the treatment with the iodine I have found very efficacious. When an effusion of serum has taken place in the chest, the iodine, combined with the squill, is an invaluable medicine. The physician must of course proportion the combination and dose to the existing symptoms. I should not discharge the duty I owe to the profession and to the public in general, were I not to call their attention to a mode of treatment that I have found so decidedly efficacious. Impressed with these sentiments, and for the sake of suffering humanity, and not from motives of interest, I am anxious to make it generally known; and I am the more particularly induced so to do, as the means usually pursued in practice more frequently aggravate than alleviate the sufferings of consumptive patients, and, as

I have observed, hasten the fatal termination of the malady, by diminishing the vital energies of the system.

IV.

ON THE CURE OF NEURALGIA IN GENERAL.

(Concluded from page 390.)

Local Treatment.

OF the local remedies for neuralgia we need say but little. Dr. M., like Dr. Heberden, found blisters to aggravate the pain when placed near the nerve affected. What has been called a perpetual blister is still worse, as proving "almost always a positive aggravation, not only of the local disease itself, but of the general irritation and disorder of the system."

"The only local remedy from which I have really seen such advantageous effects as to induce me to recommend it, is the application of steam directed by the usual means of a pipe, to the affected part; while of course the same reasoning applies, if in a minor degree, to fomentations and hot water. The value of these latter applications, indeed, in rheumatism of the face, in the rheumatic or neuralgic ophthalmia, and in sciatica, has long been known; if, from their too great simplicity, and their not being 'made up in the apothecary's shop,' they are less valued than they deserve. But while I consider the blast of steam as the most effective of all the modifications of this practice, I have often succeeded by means of it, in removing, almost instantaneously, a paroxysm of the severest neuralgia of the face, and, occasionally, so as to put a stop,

in the chronic disease, to an entire relapse; which, from all the patient's past experience, was expected to last some weeks." 391.

Cold applied to the part does sometimes give temporary, but never permanent relief. On the contrary, it generally exasperates the subsequent sufferings of the patient.

"Though I have already spoken of the use of narcotics, this is a more convenient place to point out one advantage to be derived from them; a fact which I purposely postponed, on account of its connection with the useful effects of hot water and steam. As a means of diminishing pain during the painful state, they are nearly useless, unless pushed to such an extent as to stupify the patient; in which case it is probable, as I have already insinuated, that their effects are injurious, while it is easy to comprehend how they ought to be so, by inducing indirectly that debility which so prolongs and aggravates all the neuralgiæ. But when the acute state is past they become useful, as tending to remove that soreness which remains after the chief pain has ceased, and also by reducing the general irritation which has been excited by it. Thus also they sometimes act usefully, even as local applications, at least to sensible parts; and it is probably on this principle chiefly, that they are of advantage in the neuralgic inflammation of the eye." 394.

Dr. M. next adverts to the lædientia, and satirizes with no small degree of force, the once celebrated practice of dividing the nerve in neuralgia; but as that practice is now laid in the "Tomb of the Capulets," we need not

trouble our readers or ourselves on that point. The use, or rather abuse, of excessive purgation, is next denounced by our author, and not without reason. Low diet, of course, comes in for its share of censure, and, as far as neuralgia is concerned, we have no fault to find with our author's strictures. But when he comes to ridicule the plan of abstemious living in dyspeptic complaints, he goes beyond his depth, and proves to those who have infinitely more experience than himself, that he knows nothing about the matter. This is the misery of having a hobby-horse. A man hits upon one good idea or thing; but he is not content with making that idea or thing useful to the world,—he must push it to extremes, and endeavor to make it the “universal good.” Dr. M'Culloch must be well aware that no medical journal has done him so much justice as ours; and that we have proclaimed his merits through every region of the earth, which the “rising or the setting sun surveys.” He is too sensible not to know that our praise is the more valuable in proportion to the impartiality which we display towards his failings,—at least what we consider his failings. The following case, which we shall give in Dr. M.'s own words, does not at all support his anathema against *abstinence* in dyspepsia, though it is brought forward by him as a “COUP DE GRACE” to that system.

“This unfortunate philosopher had been long subject to the usual dyspeptic and nervous symptoms of studious men, and was of a sallow and emaciated complexion; appearing, in familiar language, to be far more in want of addi-

tional blood than of its abstraction, while his disorder was continuously aggravated by a system of low diet, adopted on the same mistaken views. Passing every day with him, in company with an English physician, it was easy to watch that over which we had no control; as there would also have been no propriety in attempting to oppose ‘the best advice in Paris.’ Headach was, as usual, one of the occasional symptoms; and on one unfortunate day he was induced to send for his surgical friend, by whom he was immediately bled. The headach, on the following day, continued, or rather returned, as it had formerly done, but with increased confusion of thought; the pulse and all else indicating, to the English physicians in question, increase of general debility, and compelling us at length to offer advice, which was however opposed by the usual arguments. A second bloodletting of course took place; and the consequence was that he became, but only in the night, partially delirious,—a result easily explained, in its very limitation. It was then determined, in full consultation, that there was inflammation of the brain,—to the exceeding surprise, not without remonstrances, of the two English physicians,—and, consequently, with the addition of blisters, shaving the head, and ice, another bloodletting was ordered and practised. The delirium then increased, while the pulse became feeble enough, as might have been supposed, to have made any man reflect; but as this did not happen, or rather as the reflections took the opposite course, the practice was persevered in, and on the following day the pa-

tient died,—leaving the physicians, doubtless, convinced, as usual, that he had not lost blood enough. Such is a French case ; but it would be easy to give no small number of parallels from English practice ; and should it make no impression at present, the day will come round again when its value as well as its nature will be understood.”
403.

Doubtless there might be many cases collected on both sides of the channel, where sanguineous depletion has been carried too far, and where irritation is mistaken for inflammation. This is the great source of error. Where inflammation actually exists, there cannot be very much mischief done by taking away a little more blood than is necessary. But where the *neuroses* are treated as *phlogoses*, which was the case with the unfortunate gentleman in Paris, then indeed the havoc of constitution is tremendous, and life itself is often sacrificed. With the following specimen of our author's sarcastic strictures on physicians and physic, we shall close this article.

“It were well indeed if not only ruined constitutions, but even death itself, were not the frequent, the almost daily result, of physic thus misapplied in all the analogous and parallel cases, as also in some others ; the produce of a combination of system, fashion, and ignorance, which renders physicians and physic the just terror at present of all those who can see and distinguish. It is difficult to speak without high indignation as well as horror, of what we thus daily witness. To suppress the former is impossi-

ble, when our own, perhaps dearest friends, have thus been destroyed : and well now, perhaps, will he decide, who, like Napoleon, resolves to exclude this art and its professors entirely ; for, on the arithmetical average, he will assuredly be far on the side of security. It is but to open our eyes to see the truth of this every day ; while if it is over the ruined health or the life of females, that we shall most often have occasion to grieve, from the obvious reason that in them the nervous affections thus mistaken and maltreated, chiefly abound, or are chiefly brought before physicians, so has there been a rapid increase of the evil, from the numbers who, returning from a continental residence with the consequences of marsh fever which I have so often described, have been subjected to this truly mortal as well as mistaken treatment.”
421.

The last chapter in the work is one of a different cast from the others. Having terminated his Essay when his evidence was exhausted, and his induction carried as far as it could safely go, Dr. M. ventures on a chapter of “conjectures respecting the condition of the nerves and nervous system in intermittent and neuralgic diseases.” These conjectures are ingenious, and some of them plausible ; but we have no space left for samples of them here. We part from our author with feelings of much respect and esteem,—believing that he has contributed much more to the advancement of our science than many who have held their heads much higher in the republic of medicine.

V.

From the Western Journal of the Medical and Physical Sciences.

History of a Case of Empyema from protracted Measles and Pleurisy, in which the Operation of Paracentesis gave immediate Relief.

By Dr. SAMUEL MERIWETHER, of Jefferson, Indiana.

CALVIN COOK, a youth of nineteen or twenty, of sanguineous temperament and delicate fibre, was attacked with measles some time last winter, perhaps in February, (1829,) while at work on the Louisville and Portland Canal. He returned home to his mother's, (Clark co. Ind.), where he remained a few weeks, when he was able to resume his labor. His cough remained, however, and from his exposed situation he was taken with pleurisy, attended with violent pain in the left lobe of the lungs. From the best information I could gather, he was neglected or not regularly attended by his physician, and became emaciated, with cough, dyspnoea, a gradual enlargement of the left side, difficult respiration when placed on the right side, general debility, and hectic exacerbations.

On the third of May, I was called in consultation with Dr. Lewis. On examining the patient, I concurred with the Doctor in the opinion, that an operation was the only means of relief that could be employed. The chylopoietic viscera appeared to be affected from contiguity or sympathy of parts, as there were considerable tension and tenderness at the pit of the stomach, with enlarged spleen; he was therefore directed to take a cathartic. On the morning of the

4th, Dr. Lewis visited the patient. The medicine had operated, and dejections from his bowels were healthy. During the evening he had two chills, with an entire absence of pain, &c. On the morning of the 5th, in company with Dr. Bridges, I visited our patient, and found his heart beating with considerable force on the right side, with general œdema of the left, which measured, from the spinal column to the sternum, nearly double that of the right, and had an indistinct fluctuation.

I gave the young man our opinion relative to his case, and that an operation was the only means of relief. To this he submitted with fortitude. Proceeding to the operation, he was laid close to the edge of the bed, (previously made firm,) with the affected side presenting. I made an incision between two and three inches long through the integuments, betwixt the sixth and seventh ribs, cutting close to the edge of the seventh, and carefully avoiding the intercostal artery; on the knife's passing through the intercostal muscles, the distension of the pleura costalis was very great, and on puncturing it a volume of pus issued forth and continued to run for forty minutes, when his pulse became so languid as to require an immediate dressing of the wound. He expressed himself better under the discharge. We gave him an anodyne, and directed wine and water to be given during the evening, should his pulse continue weak and low.

On the morning of the 6th, I found him every way better; he was free from fever, slept pretty well, had some appetite, and his

respiration was easy, whether he lay on one side or the other. The distended ribs had subsided, and likewise the œdema; the wound appearing to close, I introduced a blunt-pointed probe and leaden canula, about one and a half inches long, which kept up a discharge for two weeks at least.—The quantity of pus evacuated from first to last, was judged by all present to be two gallons. From this time the patient's treatment was committed to the care of Dr. Lewis, by whom I have since

been told that the quantity of matter discharged while under his care, was equal to the first. His health was now fast improving; skin soft and perspirable; secretion from the kidneys and liver healthy; free from cough; wound entirely healed; and he takes gentle exercise every day on horseback or in an easy carriage. The general treatment has been aperients, elm or flaxseed tea, with Dover's powder, occasionally at night, and lastly, the sulphate of quinine as a tonic.

SKETCHES OF PERIODICAL LITERATURE.

DIGESTIVE PROCESS.

DR. THOMSON, of the University at Glasgow, has suggested a new and somewhat curious explanation of the changes induced in the food by the process of digestion. Some experiments of Dr. Wilson Philip seem to show, that when the gastric nerves have been divided, the nervous influence may be supplied for a certain time, and digestion may be artificially continued, by passing a current of electricity from a galvanic battery through the stomach. The identity of the nervous influence with galvanism being thus rendered probable, Dr. T. suggests that its effect may be to decompose the muriate of soda contained in the food, and thus to set at liberty the muriatic acid, which, dissolving the food itself, produces chyme. This solution being effected, the acid is no longer wanted, and is therefore neutralized by the bile, which, besides a small portion of free alkali, contains picromel,

a substance capable of uniting with the acid, and of forming with it an insoluble compound. The soda of the salt, in the mean time, is otherwise disposed of, and goes to form the blood, the bile, and the other secretions; in all of which more or less of it is found. Dr. T. thinks many important results would follow the establishment of this theory, and particularly an improved method of treating dyspepsia.

PARALYSIS ATTENDED WITH PECULIAR SYMPTOMS.

THE following case is related in the N. A. Journal:—A child, three years of age, of strumous diathesis, was attacked with paralysis of the muscles of the back and inferior extremities while riding in a carriage with her mother. Bleeding, frictions, &c., were employed, and sensation restored to the affected parts at the end of an hour. A second attack, affecting the right extremities only, was experienced next morning, and

laste about the same period. A similar paroxysm occurred daily for about a week, when they ceased, and for several weeks the child had excellent health. At the end of this time, a recurrence of the paroxysms took place with similar intervals. She continued to be subject to the disease in this manner until her death, which happened at the age of six years. Dyspepsia and costiveness were present from the commencement of the attacks, induced apparently in a considerable degree by improper diet; and a marked diminution in the severity of the disease was observed to follow an improvement of the digestive powers. After death an examination was made, and in the small intestines were found four distinct intus-susceptions, attended with considerable structural alteration, which seemed to prove them not to be of recent origin, and rendered it likely that they were coëval with the commencement of the symptoms above mentioned. There was no other morbid alteration of any importance.

EMPHYSEMA OF THE LUNGS A CAUSE OF ASTHMA.

DR. COATES, of the above Journal, thinks that asthma is often produced by the rupture of the airvessels of the lungs during severe fits of coughing, and the consequent effusion of air into their substance. He adduces, in support of this opinion, the examination of two cases in which asthma had occurred during life, both of which presented this phenomenon. Such an accident, if happening to a considerable extent, would of course

produce permanent inflammation of the lung, impair its function, and produce dyspnoea. The desire for cool air, during fits of asthma, may be accounted for, according to Dr. C., by its greater density, and consequently larger proportion of oxygen.

NITRATE OF SILVER.

MR. HIGGINBOTTOM seems to be still unwearied in finding out and publishing the virtues of his favorite remedy. A second edition of his treatise has lately made its appearance, enlarged by the addition of much new, useful, and entertaining matter. The cases in which it has been useful, though they do not comprise all the ills that flesh is heir to, certainly constitute a formidable catalogue. Phlegmonous inflammation is subdued, and prevented from attaining the suppurating stage; the progress of erysipelas is checked; inflammation of the absorbents is arrested in its progress; punctured wounds are successfully treated; and chronic ulcers which have resisted every mode of treatment, are cured by its application. Mr. H. deserves the thanks of the profession here, as well as abroad, for his perseverance in investigating the virtues of this remedy; and whether the sanguine expectations he seems to indulge of its future usefulness are to be realized, or otherwise, the facts which he has collected in regard to it, will be of permanent value and importance.

URETHRAL STRICTURES.

MR. STAFFORD, of London, has published an account of eleven cases in which this affection was treated by

incision. The instrument employed by Mr. S. is called the *lancetted stilette*. A description of this instrument was given in a former work of Mr. S., and is quoted in the London Med. and Phys. Journal for September, 1828. Five of the cases refer-

red to, were those of impermeable stricture; i. e., which would not permit the passage of the smallest bougie. The results are highly favorable to this mode of practice in similar desperate emergencies.

BOSTON, TUESDAY, AUGUST 11, 1829.

MESMERISM.

WE know not whether our readers will recognize, under this title, the once celebrated doctrine of animal magnetism; nor should we remind them of its existing title, were it not that our attention has just been caught by an elaborate paper in the London Med. and Phys. Journal, which appears to be written by a zealous advocate for the truth of the doctrine. This writer asserts, that so far from having been exploded in consequence of the experiments instituted to test its truth, the results of which were by many thought decisive against it, it has continued to grow and flourish, while a resistless weight of testimony has been accumulating in its favor. The facts which compose its early history may be briefly stated. About the year 1784, a gentleman in Paris by the name of Mesmer, pretended to have discovered a universal remedy for disease in a certain volatile fluid which he termed animal magnetism. He considered this fluid as diffused through all space; as capable of entering into the substance of the nerves, on which it produced peculiar effects; and as capable of being transmitted from one body to another, whether animate or inanimate,

through an indefinite space. Such, in fact, were the marvellous effects reported of this new remedy, and so general the excitement in regard to it, that a commission was appointed by the king, consisting of four physicians and five members of the Academy of Sciences, of whom Dr. Franklin was one, to investigate the whole matter. Their verdict was, as might have been anticipated, that the effects produced were referrible to the influence of the imagination alone. The individuals subjected to the trial were affected very differently, apparently according to their various nervous susceptibility. Some were calm and tranquil, and felt nothing; some experienced faintness, nausea, rejection of food, and diarrhoea; and many had convulsions. These effects, however, did not follow unless the patient was aware, by seeing the movements of the operator, that she (the subjects were generally females) was under treatment. On the other hand, many were affected in a similar manner by merely being made to believe themselves the subjects of experiment, although the motions supposed to be necessary to produce the effects, were not performed by any one. The examiners also submitted them-

selves to be operated on, but experienced no effect whatever. Many other interesting particulars respecting these experiments, are related in Dr. Rees' Cyclopaedia,—article Imagination.

It might, perhaps, be inferred, that after trials so extensive and results apparently so satisfactory, the doctrine of Mesmerism must have fallen into discredit. This, however, does not appear to be the case; since at the present period we find a strenuous defender of the cause in one of the contributors to a distinguished medical publication, who adduces, in support of his opinion, the sanction of highly respectable names, and facts which we seem compelled to hold indisputable. Mr. Chevenix, the author of the article, gives us a letter from a medical friend in Ireland, who cured a patient of colic simply by directing his attention to the epigastric region. After this had been continued two or three minutes, the man turned round suddenly and vomited an immense quantity of acrid bile. This was followed by free evacuations from the bowels, and entire relief. The same means were put in operation, three days afterward, to produce evacuations, and were equally successful. A third trial of mesmerism completed the cure; and the fortunate patient, who had for years been suffering with constipation and other symptoms of dyspepsia, was restored to perfect health.

The *second* case was one of confirmed consumption, and was cured by using the remedy twice a day for about a month. One *dose*, in parti-

cular, is said to have caused sleep and the exhibition of some interesting phenomena. Their nature is not stated.—The *third* was a case of chlorosis cured in thirty days, but followed by a relapse on discontinuing the treatment.—The *fourth* was a case of worms in a girl of twelve. The remedy was employed for three weeks, during which time she passed great numbers of creeping things, and grew better. The treatment was then discontinued, but the girl's health went on improving, and she had no return of the complaint.

It has been asserted by the opponents of Mesmerism, that it proved most effectual with patients of a nervous temperament. In order to test *fully* the accuracy of this opinion, Mr. C. tried it on ten of the residents of an insane hospital. The consequence was, as had been expected, that the patients remained in *status quo*; so that the conclusion was inevitable, that Mesmerism does not produce its effects through the medium of the nervous system.

But, independently of his own experience and that of his friends, Mr. Chevenix finds, in the authority of more than one distinguished name, additional support of his favorite doctrine. That philosophers so eminent as Cuvier and Laplace, should have given their testimony in its favor, is certainly a point of no small importance; and as the remarks of the former are decidedly the most favorable, we venture to give them as quoted by Mr. C.—“It must be confessed that in all experiments, the object of which is to determine the effect which the nervous system of

one person may have upon that of another, it is difficult to distinguish the effects of the imagination of the person acted upon, from the physical effects produced by the person who acts. Yet the effects produced upon persons in a state of insensibility, and that produced on animals, no longer permit *it to be doubted* that the proximity of animated bodies, under certain circumstances, produces an effect wholly independent of the imagination of either; and this owing to a communication between the nervous systems of the parties."

This is strong language, and yet the inference laid down seems to be an inevitable one from the facts alluded to. Of the truth of these, we do not hold ourselves authorized to express our disbelief; but no similar facts are adduced in Mr. C.'s cases, and therefore it seems not unjust to presume that none were known to him from personal observation. Should the truth of the doctrine ever be thought worth a trial in this country, it will afford us much satisfaction to record the results.

ANATOMICO-SURGICAL DRAWINGS.

THE Messrs. Carvill, of New-York, have issued proposals for publishing, in the course of the next year, a translation of a German work, by L. J. Von Bierkowsky, entitled *Anatomico-Surgical Drawings, and Descriptions of all the Surgical Operations, according to the most approved Methods*. This work is to contain 570 lithographic drawings on 58 plates in folio; to which will be annexed two volumes, giving a concise explanation of each operation. In

these plates will be exhibited the parts concerned, in their natural position, in such unnatural position as they may have assumed by structural disease, and each distinct step or stage in the proper operation.

It is stated in the Prospectus that the lithography is to be executed at Berlin, "under the special direction of two of the most distinguished professors of the University of that city."

Subscribers are promised the first impressions of the plates, and will pay for the whole work but \$30. The subscription list will be closed on the 1st of November, after which the price will be raised to \$40.

The specimen of the work which accompanies the Prospectus, induces us to believe that it will greatly advance the science and the art of Surgery among us, and be to the inexperienced practitioner an aid such as he can find in no other book.

MEDICINE IN ITALY.

AT the University of Pavia, the candidate for a degree is obliged to have studied four years, and to have attended lectures on every branch of knowledge connected with medicine; as well as lectures on Surgery, both clinical and theoretical. The pupils in Surgery devote their time principally to Anatomy, Surgery, and Midwifery; but they also attend lectures on the more immediate subjects of medicine. The examination for a degree is a public one. The candidate draws out of a bag, containing the names of the principal diseases, those of four, which he presents to his examiners, who at once question

him on the principal points in regard to each of them. He is then shut up in a room, where he writes a thesis on one of those diseases solely from his own knowledge, and without any assistance from books. This mode of examination adopted, is extremely fair and liberal, since it gives the examiners no opportunity for preparing themselves on particular topics, and therefore no unjust advantage over the pupil.

NEW AND VALUABLE PREPARATION.

A "*Concentrated Compound Decoction of Sarsaparilla*" has been recently prepared by a London chemist, and is spoken of in one of the journals of that city in the following terms of commendation:—"This preparation we find, on analysis, to contain, in a concentrated state, all the medicinal virtues of the articles which enter the compound decoction in great perfection. It is so far concentrated by steam, (being entirely free from empyreuma,) that *one tablespoonful, added to a pint of pure water, readily forms a pint of the compound decoction*; and in justice to the preparers, we must say, appears to be more impregnated with the virtues of the ingredients, than the decoction made in the usual way. A large teaspoonful of this concentrated decoction, which may be taken in a wineglass of water, is equal to a quarter of a pint of the compound decoction. One very important advantage of this is that a dose, equal to a quarter of a pint of the compound decoction of the London Pharmacopœia, may be taken in a small wineglass of water, so as not to oppress or relax the stomach by quantity. Another advantage is, that in its concentrated state, it will keep good for many years."

Mr. Ebenezer Wight, apothecary in Milk Street, has, at our request, procured a quantity of this prepara-

tion from the inventor, which he submits to the prescription of the faculty.

Quinine and Digitalis.—A medical gentleman of Cologne recommended, some years ago, the combination of these remedies in consumption. The success of the practice has satisfied him of its correctness. One patient, a scrofulous girl, affected with tubercular phthisis, was restored by it to perfect health. The mode of administering these remedies was as follows:—

R. Sulph. Quinin. gr. iij.
Pulv. Digitalis Purp. gr. 1-3,
" Fenicul. gr. viij. M.

This dose was given four times a day.

Camphor in Puerperal Mania.—This gum has recently been found serviceable in this alarming and obstinate affection. Professor Berndt has reported several cases in which it subdued the disease after other courses of treatment had proved unavailing. This does not appear to be one of the *on dits* or idle conjectures of the day. The Professor's authority is good, and he speaks from his own personal experience. He gave from one to four grains every hour, or less frequently in some cases, and sometimes used injections of the same medicine in doses of ten grains.

The Simple Aromatic Waters.—Mr. Buswell, a respectable chemist of March, recommends apothecaries to make simple peppermint water, and the other simple aromatic waters, by rubbing the essential oil with a little calcined magnesia in a marble mortar; and, when well mixed, to add by degrees, (continuing the trituration,) the pure water. So much calcined magnesia should be used that it may appear to be a dry powder after it is well mixed with the oil. The water, when filtered, is perfectly clear, and the oil is not separated so as to adhere to the bottle

like that of distilled water. This method of impregnating water with an essential oil, is certainly superior to that employed by apothecaries in general, viz., with sugar and spirit; and the waters are more pleasant to the palate than the distilled waters, which are generally stale, and more or less possess an unpleasant empyreumatic flavor.—*Gaz. Health.*

Remarkable Discrimination.—It is stated in the New-York papers, that the following decrees have been “solemnly adjudged by their Board of Health:—”

1. It is determined that sugar in *casks*, coming from Havana, New Orleans, &c., in a healthy vessel, need not be removed to some place out of the city, nor undergo the process of purification, but that sugar in *boxes*, coming from such ports, though in a healthy vessel, must undergo ventilation and cleansing.

2. It is determined that sugar, both in casks and boxes, coming from such ports, in a vessel in which any death has occurred on the voyage, cannot be landed in the city, but must be taken somewhere else, and be ventilated and cleansed.

3. It is decided that iron, lead, and above all, tobacco, coming from such ports in vessels in which deaths have occurred during the voyage, must be ventilated and cleansed.

4. A merchant applied to the Board for permission to bring twenty puncheons of *rum* into the city from Brooklyn, which was imported from New Orleans in a vessel in which several persons died on the voyage; but it was decided that it should not be brought over.

5. It is said that smoked hams and tongues, imported in the same vessel, are under the same sentence of condemnation.

SIR HUMPHREY DAVY died at Geneva, of a palsy, on the 29th of May last, in the 51st year of his age.

Three Causes of Disease.—A writer in a contemporary advises his fellow-beings, if they wish to avoid confirmed stomachic disease, to shun three things, viz., “friends’ prescriptions,” “medical books,” and “news-paper nostrums.” Of these we should judge the former to be productive of the most harm among mankind in general.

Close Reasoning.—A Phrenologist, who was as tenacious of his pence as of his doctrines, wrote a defence of his favorite science, and sent it to the Edinburgh Reviewer, in the hope of making a convert of him. The essay was written so extremely fine, in order to save paper, that the reviewer could not read it; he accordingly sent it back to the author with this note: “Sir, if you reason as closely as you write, you are invincible.”

New Medical Books.—Dr. Kennedy, of London, has in forward preparation for the press, a work which will form 3 vols. 8vo., entitled, “A History of the Medical Sciences, Biographical and Philosophical; containing an Account of the Persons and Writings that have conducted to the Improvement of Physic, from its Origin in Britain to the end of the 18th Century.”

Dr. Hawkins, of Exeter College, Oxford, Eng., has just published a work of 234 pages 8vo., entitled “Elements of Medical Statistics.”

Thos. Stone, Esq., President of the Royal Medical Society of Edinburgh, has issued an Anti-Phrenological History of the developement of Burke, Hare, and other atrocious murderers.

REPORT OF DEATHS IN BOSTON,

The week ending July 31, at noon.

Of colic, 1—consumption, 5—cholera infantum, 1—convulsions, 1—childbed, 1—delirium tremens, 1—drown, 1—inflammation in the bowels, 1—infantile, 2—measles, 2—mortification, 1—old age, 1—peripneumonia, 1—unknown, 3. Males, 13—females, 9. Stillborn, 1. Total, 23.

ADVERTISEMENTS.

BERKSHIRE MEDICAL INSTITUTION.

THE Annual Course of LECTURES will commence on the first Thursday in September, and continue fifteen weeks.

Theory and Practice of Physic by H. H. CHILDS, M.D.

Anatomy and Physiology, J. D. WELLS, M.D.

Medical Jurisprudence, S. W. WILLIAMS, M.D.

Theoretical and Operative Surgery, S. WHITE, M.D. and S. P. WHITE, M.D.

Materia Medica, Pharmacy and Obstetrics, C. B. COVENTRY, M.D.

Chemistry, Botany, Mineralogy and Natural Philosophy, C. DEWY, M.D.

Matriculation ticket, \$3. Fee for Lectures, \$40. Library ticket, \$1. Graduation, \$15.50. Board, including washing, lodging and room, \$1.75 a week.

Pittsfield, July 22, 1829. aug4tsept30

MEMOIRS OF DR. GOOD.

JUST published and for sale by CARTER & HENDEE, Memoirs of the Life, Writings, and Character, Literary, Professional, and Religious, of the late JOHN MASON GOOD, M.D. F.R.S. F.R.S.L. Mem. Am. Phil. Soc. and F.L.S. of Philadelphia, &c. &c. &c. By OLIVIER GREGORY, LL.D. Aug. 11.

CARTER & HENDEE

HAVE just received LIZAR'S ANATOMICAL PLATES, in 12 Nos., cold and letter press.

Barton's North American Flora, 3 vols. do. Medical Botany, 2 vols.

Bonaparte's Ornithology, 3 vols.

A System of Human Anatomy; translated from the 4th Edition of the French of H. Cloquet, M.D. By ROBERT KNOX, M.D. F.R.S.E.

CARTER & HENDEE,

Corner of Washington and School Streets,

HAVE recently published and for sale, LECTURES ON ANATOMY, SURGERY AND PATHOLOGY, including Observations on the Nature and Treatment of Local Diseases—delivered at St.

Bartholomew's Hospital, by JOHN ABERNETHY, F.R.S.

ADVERTISEMENT.

The estimation in which the opinions of the celebrated teacher in the School of St. Bartholomew's is held, must render the present volumes invaluable to the student, while it will equally serve as a work of reference to the elder branches of the profession, containing, as it does, the views and opinions of one whose life has been spent in instruction, and whose talents and acquirements are no less admired than respected.

Nor is the value of the volume confined either to the medical *tyro* or the more experienced practitioner. The popular reader, from the plain, lucid and colloquial style of the Lectures, will derive both pleasure and instruction from the perusal, while the general contents yield a body of information not to be met with in works of this description, and which will render it in families a book of familiar consultation and reference.

July 28.

TURNER'S CHEMISTRY,—NEW EDITION.

JUST published, and for sale, by CARTER & HENDEE,—Elements of Chemistry, including recent Discoveries and Doctrines of the Science. By EDWARD TURNER, M.D. F.R.S.E. Second American Edition.

COTTONS & BARNARD have for sale, "An Inquiry concerning that disturbed state of the vital functions usually denominated Constitutional Irritation. By Benjamin Travers, F.R.S., senior Surgeon to St. Thomas's Hospital, President of the Hunterian Society of London, &c."

NEW LONDON WORK.

JUST received, by CARTER & HENDEE, corner of Washington and School streets, A Chemical Catechism; in which the Elements of Chemistry, with the recent discoveries in the Science, are clearly and fully explained. Illustrated by Notes, Engravings and Tables, and containing an Appendix of select Experiments, &c. By THOMAS GRAHAM, M.D. Member of the Royal College of Surgeons in London, &c. &c.

C. & H. have also just received, Elements of Chemistry. By ANDREW FYFE, M.D. F.R.S.E.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

THE BOSTON
MEDICAL AND SURGICAL JOURNAL.

Vol. II.]

TUESDAY, AUGUST 18, 1829.

[No. 27.]

I.

Communicated for the Boston Medical and Surgical Journal.

Case of extensive Disease of the Brain, unaccompanied by the usual Diagnostic Symptoms.

By DAVID PALMER, M.D.

IN January and February last, a few cases of "Canker Rash," (Rosalia Paristhmica of Good,) occurred in this vicinity. They were usually mild, and readily yielded to a mild treatment. The case which I am about to relate, was however an exception to this general character of the disease. A daughter of Mr. Ball, aged six years, was attacked with the symptoms of the disease on the 25th of December; and on my visiting her on the 28th, the surface was nearly covered with the scarlet eruption; the fauces red and swollen, with considerable difficulty of deglutition; and a degree of heat and hardness of pulse, that indicated active inflammation.

Eight ounces of blood were taken, and a cathartic dose of calomel, to be followed with castor oil, was ordered.

29th.—The purgative had produced but little effect, and the inflammatory symptoms undiminished. Six ounces of blood taken, and the purgatives continued with the aid of injections.

30th.—Symptoms and treatment

nearly the same as yesterday. No evacuations from the bowels.

31st.—Symptoms as before. At the suggestion of Dr. Sweatt, who had been called to advise, gave Croton Oil three drops, in divided doses. Calomel, enemata, &c., as before.

Jan. 1st.—No perceptible alteration. Contin. med.

2d, 3d, and 4th.—Evacuations from the bowels on each of these days, with the expulsion of about one hundred worms (lumbrici).

6th.—Patient nearly free from pain, and apparently convalescent; but it was now discovered for the first time that she was totally deaf. For a week succeeding this date, my patient continued to improve in every respect, except the sense of hearing, which was totally lost. All her other senses were perfect; her mind cheerful; pulse natural, with some appetite and a regular state of the bowels. Medical treatment suspended, with the exception of occasional blisters to the neck and arms.

14th.—Attacked with vomiting and pain in the head, returning in paroxysms twice or thrice in twenty-four hours. Various remedial agents were now employed, such as leeches, blisters, mercurials, the warm bath, &c.; but as they were productive of no permanently beneficial effect, it is not necessary to detail the treatment more minutely. About the 20th of the

month, she was affected with a contraction of the muscles of the back and neck, and the head was drawn backward. The pain in the head and occasional vomiting continued, with increasing prostration of strength, until the 1st of February, when she died.

Post-mortem Examination, ten hours after Death.

In the head, a stratum of purulent matter nearly covered the pia mater, and in some places its structure was destroyed by ulceration. Suppuration had also occurred in almost every part of the substance of the brain, but chiefly in its base. The origin of the auditory nerves was surrounded with purulent matter, though not to a greater degree than that of most of the other nerves which arise within the skull. The lateral ventricles were distended with serum, and it was judged by the medical gentlemen who assisted in the examination, that one-third of the contents of the skull consisted of pus and serum. The contents of the thorax and abdomen were not examined, as there was no reason to suspect a lesion of any of their organs.

What renders this case important, in my view, is the fact that such extensive destruction of the brain should occur, with so few of the symptoms supposed to be diagnostic of severe cerebral affection.

Thetford, Vt., July 30th, 1829.

II.

GUTTA SERENA.

Notes of a Case of Gutta Serena of the right Eye, from the Pressure of a Tumor on the Optic Nerve.

By JEDEDIAH COBB, M.D., Prof. of Anatomy in the Med. Col. of Ohio.

MR. H——, from Baltimore, consulted me for an affection of his

right eye. He stated that, being on a fishing excursion up Chesapeake Bay, in the month of August, 1825, he was suddenly seized, whilst exposed to the rays of a hot sun, with an acute pain in the bottom of the orbit of the right eye, shooting far back into the head. The pain continued, without abatement, until he obtained medical aid on his return to Baltimore. The plan of treatment, as near as I could ascertain, was strictly antiphlogistic. As the pain decreased, the sight of the affected eye gradually diminished, until it was completely lost. When I saw him in this place two years afterwards, the eye presented the appearance of a well marked case of gutta serena; the pupil was greatly dilated and irregular in shape; the iris, when exposed to the strongest light, did not contract. The general aspect of the eye was peculiar, and its natural lustre and intelligence lost. I told him I could do nothing with any prospect of success for the restoration of his sight, and I believe nothing was done. About three weeks after consulting me, he was violently attacked with arachnitis, of which he eventually died, when leave was obtained to examine the body.

Morbid Appearances.

On opening the cranium, the arachnoid membrane exhibited traces of extensive inflammation, being covered with coagulable lymph and serum over its whole extent. The ventricles were much distended with serum. Whilst removing successive portions of the cerebrum, the scalpel at length struck against a hard substance, which, on careful examination, was found to be a tumor

something larger than a nutmeg, and of a spheroidal shape. It lay directly in the course of the optic nerve of the right side, posterior to its junction with its fellow. The nerve was completely obliterated by its pressure. The tumor was composed of calcareous matter enclosed in a cyst resembling the coats of the arteries. The cyst was attached to the carotid artery, and probably resulted from a diseased action in its integuments.

Remarks.

From the above dissection we learn the cause of the blindness, and how utterly ineffectual all remedial agents must prove in certain cases of gutta serena. We may likewise draw the important physiological conclusion, that the fibres of the optic nerves do not decussate each other, as is thought by many anatomists.—*West. Jour. of Med. & Phys. Sci.*

III.

COLLEGE OF PHYSICIANS.

At a late meeting of the London College of Physicians, we find a remarkable, or rather curious, proof of the medical profession of the celebrated John Locke, Gent. Also, some acute observations, by Sir Henry Hallford, on Shakspeare's 'Test of Insanity. Both these we offer for the instruction and entertainment of our readers.

Case of Tic Douloureux, by the celebrated Locke.

A LITERARY curiosity of great interest was laid before the Meeting: a case detailed by the celebrated Locke. This curious document was obtained by Dr. C. M. Clarke, from Lord King, and

presented to the College. The original MS. was laid upon the table, and consisted of a French Almanack, bound up with a number of leaves which had been originally blank, but which were filled with various notes and memoranda in the hand-writing of Locke, and among others the case in question.

It has often been doubted whether Locke ever practised as a physician, but the question is now set at rest. In Lord Grenville's pamphlet, entitled "Oxford and Locke," he remarks that "in the printed life of Locke, commonly prefixed to his works, we are told that he applied himself, at the University, with great diligence, to the study of medicine, 'not with any design of practising as a physician, but principally for the benefit of his own constitution, which was weak.'" His lordship goes on to observe that no such motive is ascribed to Locke by Le Clerc, from whom our knowledge of his private history is principally derived; nor, indeed, is the supposition at all probable. Le Clerc, however, asserts "that Locke never practised physic for profit, though he was highly esteemed by the ablest physicians of his time." In proof of this, we need only quote the following passage from Sydenham:—"Nosti preterea quam huic meæ methodo suffragantem habeam, qui eam intimius per omnia perspexerat utrique nostrum conjunctissimum, Dominum Joannem Locke; quo quidem viro, sive ingenio judicioque acri et subacto, sive etiam antiquis, hoc est, optimis moribus, vix superiorem quemquam, inter eos qui nunc sunt homines, repertum iri confido, paucissimos certè pares."

Lord Grenville says that the assertion that Locke had never actually practised, is "unquestionably erroneous;" and the case which we subjoin, proves the correctness of his opinion.

Locke was called to see the Countess of Northumberland, who was the ambassadress at Paris, Dec. 2d, 1677. The case was evidently one of *tic douloureux*. It is entitled *Convulsio*, and the symptoms are thus described:—Acute pain over the right cheek up to her ear. In the intervals, pain in her teeth. She was warned of the approach of the fits by a throbbing she felt in the lower jaw, where she had had a tooth drawn the previous summer. The fits had been preceded by three or four days of ordinary tooth-ach. There was no swelling or inflammation; no flux of rheum; no external swelling; no indication for bleeding; besides which, that remedy had been tried some months before, without effect.

"It being night," says Locke, "I thought at present there was nothing to be done but to give her ladyship present ease by some topical application." He thought first of a blister, but paused till he had made some more general evacuation. He therefore ordered an opiate embrocation to the gums, which gave her much relief. On the following day, (for the case is related in the form of a journal,) he again deliberated about the propriety of the exhibition of an aperient, but the extreme cold weather made him conclude in the following manner:—"I apprehend that a purge, which I thought very necessary, would be dangerous in such a season, because, if weak, it might cause disorder with very little or

no evacuation; if strong, in so delicate a constitution I could not tell how to venture; besides that, I feared she might take cold in the working, which might increase the mischief."

The result of his prudent caution was, that he prescribed a drop of *æthereum terebinthinæ* on a little lint, which she applied to the gap whence the tooth had been extracted, but it did not allay the pain, and he then ventured upon the purge, and gave a mercurial one, which "wrought very well seven or eight times."

After the operation of this medicine, he prescribed an opiate draught, and during the following night she enjoyed some sleep. With occasional exacerbations, the fits upon the whole began gradually to abate in severity. He describes most accurately what we all know to be the truth in this cruel disease; how various slight causes bring on the paroxysm of pain; how touching any part of the affected side of the body, (even the foot of that side,) talking, or opening her mouth to eat, brought on the twitches of pain. He reasons upon this strange nervous affection very sensibly, considers what the original mischief was, and how far the extraction of the tooth had to do with the increase of the malady, and concludes that the root of the mischief lies in some harm done to the nerve connected with the tooth. The tooth itself, when it was drawn, was found to be a sound one, and its extraction so far from a remedy, that it increased the violence and frequency of the fits. Locke continued in attendance till Dec. 16th, a space of a fortnight, when he pronounced the lady ambassadress "quite well."

On Monday, Dec. 20th, he writes in his MS :—

“Memorandum : that my lady ambassadrice’s gums itched vehemently after the pain was gone, and did so for several days after ; and used to do so for several years before any tooth was drawn.”

Observations on Insanity. By Sir H. HALFORD.

After the above had been read, Sir Henry Halford stated that, in consequence of having understood that there was no paper for the present evening, (for Locke’s case had only just been received,) he had hastily thrown together some observations on insanity. As there was sufficient time left, he would read them to the Meeting.

Sir Henry Halford observed that in the closet scene in Hamlet the following words occur :—

“ ——— Extasy !

My pulse, as yours, doth temperately keep time,

And make as healthful music ; ’tis not madness

That I have uttered ; bring me to the test,

And I the matter will reword,—which madness

Would gambol from.”

The circumstance to which the learned President particularly alluded, was the expression “I the matter will reword ;” and he proceeded to relate the following case, in illustration of the justness of Shakspeare’s “test.” He was called, last January, to a gentleman then in a state of mental derangement. A short time previous to his illness, he had sent for his solicitor, and given directions about his will. He stated his intention of adding 500*l.* a year to his mother’s jointure, and of leaving various legacies ; adding that his friend, the solicitor, was to be residuary legatee. The

solicitor, in the most honorable manner, told him that he could not consent to the last part of the arrangement, unless at the end of six months he continued of the same mind upon the subject. In the interval, he was attacked with mental excitement, for which he was attended by Sir Henry Halford and Sir G. Tut-hill. One day, on asking him how he did, he appeared calm and collected, and answered that he was very ill, and only anxious to settle his affairs and make his will. Next day he repeated the same expressions, in a tone and manner which induced his attendants to comply with his request, and the solicitor was sent for, who brought with him a will drawn up according to the instructions he had formerly received. This was read over to the gentleman, and being asked, after each clause, if such was his meaning, he distinctly replied—yes, yes. The will was then executed, being witnessed by his physicians. On going down stairs, Sir Henry observed upon the unpleasant circumstance of the medical attendants becoming involved in a deed which was likely to become the subject of litigation, and proposed that they should return to him and apply Hamlet’s test, by ascertaining whether he could “reword” his will. With regard to several of the clauses this was the case ; but he stated that he had left one individual ten thousand pounds, whereas he had only left him five thousand ; and on being asked to whom the residue of his fortune was to go, he answered, “To the heir at law, to be sure !” Being asked who was the heir at law, he replied that he did not know. Thus, said Sir Henry, he could not “reword”

his meaning, but "gamboled" from the matter.

The author then adverted to the fidelity of the pictures drawn by Shakspeare, so justly characterized by Johnson as the poet of nature. He also alluded to the writings of the ancient poets, as containing many descriptions which might be recognized by an attentive observer. He had himself seen two of the cases mentioned by Horace, illustrated to the very life. One, a man of high rank, supposed himself present at a theatrical entertainment, and Sir Henry had heard him urging Garrick to exert himself in the part of Hamlet, which he supposed him then to be acting. The other case was that of a gentleman of large fortune, who possessed himself of everything he could get, but parted with nothing. He was brought to the Court of King's Bench, having refused to pay for a picture which he had bought, and which was valued at £1500. Sir Henry told the jury, that if they would go to the gentleman's house in Portland Place, they would find £50,000 worth of property; among the rest this very picture, with baby-houses and baubles strewed over his dining-room.

The paper was listened to with great interest, and this was increased by the very animated manner in which it was read by the learned President.

IV.

Method of treating Fracture of the Thigh Bone.

By WILLIAM C. DANIELL, M.D., of Savannah, Georgia.

IN the summer of 1819, I was called into the country to see a

child of Mr. Harboch's, about seven months old, whose left thigh had been obliquely fractured near the middle of the bone, by the nurse falling with him in her arms. I applied the many-tailed bandage with four thin splints about three inches long, to confine, as well as I could, the broken ends of the bone in apposition.

Upon visiting the child the following day, I found the fractured limb about the third of an inch shorter than the other, from the lapping of the ends of the broken bone. The patient being feverish, a laxative was directed. The dressings were renewed from time to time for about a week, when the feverish symptoms had subsided, and the child become in some measure reconciled to his confinement.

The shortening of the limb still continuing, rendered it necessary to adopt some means to counteract the contraction of the muscles, and retain the ends of the broken bone in apposition. The heat of the season, as well as the age of the patient, rendering the use of the ordinary splint (Physick's improved Desault) and bandages objectionable, I adopted the following mode of treatment:—I passed a roller of muslin around the chest of the child several times, to which I attached a bandage on each side, and extended them above the head, and fastened them to the head-board of the bed. This was done for the purpose of preventing the patient from being drawn down to the foot of the bed by the extending power. I then passed a small silk handkerchief around the ankle and foot of the fractured limb, and tied the ends together at the sole of the foot. To these united

ends of the handkerchief I attached a small cord, which was passed over the foot of the bed, where it suspended a small weight which was designed for the extension of the limb.

The many-tailed bandage, with the four small splints, were continued as heretofore. In due time the broken bone united without any shortening or other deformity.

In 1824, and five years after the fracture, I examined the limb, and found it of the same length and appearance of its fellow.

Attributing my success in the above case to the manner in which I had treated the fractured limb, I became desirous of applying that mode of treatment to other cases of a similar kind. With the assistance of my friend Dr. Richardson, I have recently treated a case of oblique fracture of the thigh bone, after the following manner:—A piece of poplar plank, long enough to extend from just below the buttock to eighteen inches beyond the foot, was made on the surface slightly concave to receive the thigh,—the upper end was cut into a semilunar form to fit it the better to the buttock, and made six inches wide,—the lower end was four inches wide. On each side of the lower end was attached a piece of board three inches high, extending up to the knee, with a gradually reduced height. A piece of board five inches high, was then fitted in the lower end, at a right angle with the lower board. In the middle of the upper edge of this piece, was placed a small wooden roller, with a concave edge, which was retained by a wire axis. The lower end of this splint, which projected beyond the foot of the

bed, was secured by passing a screw through the bottom piece into the foot-board of the bed. The fractured limb was then placed in this splint. The many-tailed bandage was applied over the fractured portion, (the bones having first been placed in apposition,) over which, at equal distances apart and around the limb, four thin wooden splints, six inches long, were placed and secured by muslin strips. A bag of dried moss was then applied on each side of the thigh, and secured by tapes passing under the board supporting the thigh, and over the limb. A silk handkerchief was then passed around the ankle, and tied at the bottom of the foot. To this projecting portion of the handkerchief was fastened a small flaxen cord, and that passing over the roller placed in the end of the case, supported a small weight. A muslin bandage was passed around the chest, to which bandages were fastened for the purpose of fixing the body to the head-board, to prevent its being drawn down. This was however soon found to be superfluous, as the weight of the body was quite sufficient for the purpose of resistance to the extending power, and was consequently discontinued. The dressings were renewed once or twice a week, according to circumstances, and the bones united readily, and without any shortening of the limb.

That portion of our patient's mattress which supported the breech, was made removeable, by which arrangement the patient could be used without inconvenience.

Whenever any shortening of the fractured limb was observed, the leg was gently raised and extend-

ed to the proper distance, where it was retained by the weight attached to the cord. And here I will observe, that the cord and weight are rather designed for retaining the limb properly extended, than for extending it. The latter it is known is readily performed. The importance as well as the difficulty of keeping up that extension, has been felt by every surgeon who has had a fractured thigh to treat. I flatter myself that the above mode of making and maintaining the extension, will be found an improvement. It has certainly been such in my hands. * * * *

It would be extremely difficult for any person who had not witnessed the treatment of this case, to appreciate the advantages which resulted from the mode which we adopted of keeping up the extension of the fractured limb. The patient could sit up in his bed without deranging the dressings. The only part in the use of which he was restricted, was the fractured limb. If in his movements he was thrown lower down in bed than was proper, he could draw himself up without deranging the dressings or displacing the fractured bones.

But the great and important indication that is fulfilled by this mode of treatment,—and by this alone have I seen it properly fulfilled,—is that there is a constant power in operation to counteract the contraction of the muscles of the fractured limb. That power is the weight suspended over the roller to the foot; and it is a power which, from its constant action, must necessarily exhaust the muscular contraction. Hence it never can occur, where this mode of extension is properly applied,

that the fractured limb will be shortened when the bones have united.

I believe that a weight of two pounds will in most cases be sufficient. My own experience, however, is too limited to enable me to speak with confidence. It is a matter which the discretion of the surgeon will readily adjust.

In treating a fractured thigh bone, it has been deemed of the highest importance to make the extension and counter-extension as near as possible in a line with the fractured limb and the course of the muscles to be acted upon. The merit of Dr. Physick's improvement upon Desault's splint, consists in an approximation to this. It is, however, only an approximation. In the treatment of the case detailed above, the extension and counter-extension were necessarily in a line with the broken bone and the course of the muscles to be acted upon, because the extension is made upon the foot, and the counter-extension consists in the weight of the body above the thigh. Let it not be supposed that such weight is insufficient for all the purposes of counter-extension; I believe it will upon trial be found ample. If it should not, the body of the patient may readily be retained in place by bandages fastened to the head-board as suggested.

Some surgeons are in the habit, as soon as called to a fractured limb, to place the patient to harness, and at once subject him to all the pain and distress of splints, bandages, extensions and counter-extensions. Such a course is, I think, to be condemned, not only as unnecessary severity to the patient, but also as adding, in many cases, additional causes of

irritation and fever. I have been in the habit myself of barely at first placing the ends of the bones in such relation to each other, as would prevent irritation,—always feeling satisfied, if at the end of the first week, or even early in the second, every measure had been adopted which promised to

promote a favorable union of the fractured bones. By this course the patient is gradually accustomed to his confinement, and bears much better the necessary restraints of the treatment than when he is at once subjected to the whole of them.—*Amer. Jour. of the Med. Sciences.*

SKETCHES OF PERIODICAL LITERATURE.

NITROUS OXIDE GAS

As a Remedy in Chronic Diseases of the Chest, &c.

THE Nitrous Oxide Gas is recommended by Joseph Curtis, Esq., in a late number of the *Lancet*, as a remedial agent of more value than many which are in better estimation. He relates, as proof of this, two cases of asthma;—one of a lady who was many years subject to the disease, and in whom the fits were frequent and very distressing.

Believing the distressing sense of suffocation experienced by this patient to be owing to the blood being prevented, by the mucus in the bronchia, from undergoing its proper changes, he conceived the idea of substituting oxygen gas for atmospheric air. The experiment was unsatisfactory, and finding this gas inconvenient to make, he substituted Nitrous Oxide, which was taken twice a day, and the effects of which are thus related:—

“From three to four quarts was the usual dose. It sometimes produced slight vertigo, and a feeling of languor: these, however, went off in a few minutes, and, in about a quar-

ter of an hour, the pulse was usually lowered from eight to twelve beats in a minute; in one instance, from 120 to 108; in another, from 104 to 96. The heat of the body was at the same time raised: a thermometer placed between the shoulders, rose in one instance from 92 to 96; in another, from 94 to 98, but never rose beyond 98. The hands and feet, which were generally cold, glowed; and the face, which was usually of a purple or leaden hue, assumed the natural appearance.”

The use of the Gas was continued several weeks. It usually relieved the symptoms when taken during an attack, and in the end seemed to have increased the strength and the digestive powers, and diminished the tendency to asthma. It produced however, some tendency to inflammation, on which account it was discontinued.

In the other case related by Mr. C., this Gas produced more decided benefit. The wheezing, cough, difficulty of breathing, pain, and expectoration of mucus, were all relieved, and the color of the face became less livid. The circulation in the extremities was invigorated remarkably, and the patient discharged cured.

TWO DISEASES EXISTING SIMULTANEOUSLY.

A CASE is recorded in an English Journal, which seems to present some phenomena in vaccination.—A child sickened with variola. To protect the brother of this child, he was vaccinated. On the *eighth* day the vesicle formed perfectly, and matter was taken from it to vaccinate another child. On the *ninth* day variola also broke out, and the vaccine pustule, which was perfect on the eighth, continued stationary, and at length dried up with the smallpox.

The child vaccinated from this pustule had a genuine cowpock, and, although exposed, escaped variola.

The conclusions of the reporter are, "that in the same case cowpock and smallpox went on together; thus showing that two pustular diseases, of a different nature, may exist at the same time in the same system; and that in the last case it would appear that one pustular disease only may be propagated from a system where two exist." How far these two diseases should be considered "of a *different nature*," is matter of doubt.

 INCARCERATED HERNIA.

Internal Use of Spirit of Turpentine in these Cases.

THE last number of the American Journal contains a striking case, by Dr. Sewall, of the beneficial effect of Spirit of Turpentine in Incarcerated Hernia. Dr. S. was led to this practice by the relation of two cases by a friend, in which it had appeared to produce speedy relief. The patient was a stout healthy man, and was

surprised by a scrotal hernia whilst at work. "I first attempted," says Dr. S., "a reduction of the bowel by taxis, but as my exertions were unavailing, I bled him largely and then renewed my exertions, but without success. I then gave him two ounces of the spirit of turpentine, and instructed my pupils, who remained with him, to repeat the same dose every hour till eight ounces were taken, or some sensible effect produced. Soon after I left him, a profuse sweat took place, and he fell into a tranquil sleep. In about two hours the hernial tumor became soft and yielding, and spontaneously retired from the scrotum. On repeating my visit in the middle of the day, I found he had taken about six ounces of the turpentine, and without experiencing any inconvenience from it. He was still sleeping, and entirely relieved. The next day he was at work in the brick-yard, and with no other complaint than that of a slight looseness of the bowels, and a scalding sensation in the rectum in passing his stools. No strangury was produced."

 SWAIM'S PANACEA.

Mercury discovered in this ci-devant popular Nostrum.

PROFESSOR HARE, of Philadelphia, has discovered, by chemical analysis, large quantities of Mercury in Swaim's Panacea. He first diluted it largely with water and added a quantity of yeast, in order to induce fermentation and thus get rid of the syrup, and attenuate the subject of his contemplated analysis. Fermentation took place, and this object was effected.

In his account of this analysis in Dr. Hay's valuable Journal, he says,

"I then transferred the whole of the liquor, then much attenuated by fermentation, and the matter which had subsided from it, into a flat stoneware vessel, and placed it in my evaporating oven. From this situation the vessel was not removed, until the contents had been converted into a dry, blackish, porous crust. Of this crust the greater part was subsequently removed from the evaporating vessel, and being rolled up in paper was placed upon a shelf. Towards the close of the last summer, I happened to examine the crust attentively, when I observed on it some globules of metallic mercury. On further examination with the aid of a lens, I discovered it to be so replete with mercurial globules, that whenever any fresh portions of the

crust were opened by means of a knife, more of them were observable. The crust was subsequently shown to Dr. Physick, Dr. Horner, and other intelligent friends, and it has been preserved in a bottle. I should have communicated these results to the public sooner, had I not been in hopes to have repeated the examination by another process; but not having as yet found it convenient to realize that intention, and as you deem it of importance that the facts which I have mentioned should be published, I send this statement to you for the American Journal."

The Editor of the Journal adds, that when Swaim first began the manufacture of this nostrum, he purchased large quantities of corrosive sublimate from an apothecary in Philadelphia.

BOSTON, TUESDAY, AUGUST 18, 1829.

PERFORATION OF THE STOMACH.

THE following case is related in a late number of the Glasgow Journal. —The patient, a man 22 years of age, who had been subject to attacks which he termed cramp in the stomach, was suddenly seized, while in the house of an acquaintance, with violent pain in the region of that organ. The degree of it was so violent that he was scarcely able to express himself, and he continued for some time to strike his hands forcibly against the epigastrium. A glass of whiskey was administered, which produced vomiting and afforded momentary relief. In a few minutes the pain returned. He suffered acutely from a sense of tearing, and complained "that his stomach was drawn to his backbone." This state

of things continued for six hours, when suddenly the pain increased to an insupportable degree; he writhed in great agony for ten minutes, then fainted, and immediately afterwards vomited a dark brown fluid-like "moss-water." He was now (2, A.M.) visited by a surgeon, who bled him, and prescribed a draught of valerian and assafoetida, to be followed by a cathartic. These remedies produced no relief; and at noon, as the cathartic had not operated, a stimulating enema was administered. He grew worse, and at 3, P.M., a physician was called in. He was now lying on his back with his thighs drawn to the abdomen; face pale and anxious; breathing quick and feeble; pulse 140; skin cold.

It appeared that since the severe

attack in the morning, the pain had gradually become diffused over the abdomen, attended with intolerance of pressure, and swelling. On the right side of the epigastrium, an obscurely defined tumor was felt, which fluctuated slightly. He now vomited incessantly a dark colored fluid, without any apparent exertion; it was thrown from his mouth to a considerable distance, in a stream about the size of a quill, like water forced from a syringe. These symptoms continued, without much alteration, till 8, P. M., when he expired.

On examination, the cavity of the abdomen was found to contain several pints of a dark colored fluid, which had a strong smell of assafoetida. On grasping the stomach, fluid was seen to issue through a longitudinal opening in its anterior surface, between the greater and lesser curvatures, about three inches from the pylorus. The perforation readily admitted the finger; its edges were slightly ragged, but without thickness, ulceration, or any other morbid appearance in the surrounding textures. There was no loss of substance where the opening existed, as its edges could be brought together without folding or puckering of the adjoining parts.

From these and other appearances of the parts, it seemed evident to the physician who examined them, that the opening was produced by a rupture; and highly probable that this had occurred at the time when his sufferings were most intense, and so remarkable a change took place in the symptoms. At that time there must have occurred a spasmodic con-

traction of the ventricular fibres sufficiently powerful to lacerate the organ. But how could contraction of the fibres of the stomach cause its laceration, or produce any other effect than that of diminishing the extent of its cavity? Those muscles which have fixed points of origin and insertion, may well be supposed capable of being ruptured by distension. But in those which, by their position, are made capable of indefinite approximation, in what manner is such an effect to be accounted for? In answer to this, the author refers to the fact, that in inspecting the texture of the stomach, the bands of fibres are found not to pass completely round it, and that in fact no individual fibre can be found to extend to more than one-third of its circumference. He suggests, therefore, the explanation, that when these fibres are affected with spasm, a laceration may take place at that point where the two circular bands unite, in consequence of their acting in completely opposite directions.

Assuming the facts to be correctly stated in this case, we must confess ourselves quite at a loss to comprehend the above explanation, and nearly as much so how to suggest any, more rational or probable. Part of the difficulty, however, which is found in accounting for the stomach being ruptured by the contraction of its own fibres, seems to arise from supposing that organ to have been wholly or nearly empty. If we admit it to have been distended by its contents, whether solid, fluid, or aëri-form, and that these contents could not escape by either of the natural

orifices, a powerful spasmodic action of the organ might perhaps occasion a new one. From the obstinate costiveness, and the circumstance of the articles, the exhibition of which preceded the cathartic, being found to have passed through the rupture, it seems highly probable that the pyloric orifice, either from spasm or some other cause, was strongly closed. The anti-peristaltic motion, necessary to the rejection of these contents by the cardiac orifice, could not coexist with that species of contraction which tended to force them in the opposite direction. Under these circumstances, the stomach containing several pints of fluid, and its contraction suddenly increasing, its coats became incapable of sustaining the pressure, and the organ was ruptured at that point on which this pressure may be supposed to have acted with the greatest force. The consequence was the escape of the contents into the cavity of the abdomen. The fainting which is stated to have taken place, seems far more likely to have followed the rupture than to have preceded it; since at all events the spasms were suspended during the deliquium; and there is no proof that they occurred after it. Why a new series of contractions, in an opposite direction, should have now commenced, is not easy to say; it appears, however, that it *must* have been so, for it is stated that the fluid was constantly ejected through the œsophagus and mouth, though a much less degree of force,—almost the force of gravity alone,—would have sent it through the ruptured orifice. The phenome-

na, both of the direct and the inverted actions of the stomach, are involved in some obscurity, notwithstanding the time and labor which have been devoted to their investigation. It is at least clear that they cannot coexist; and the truth of this fact seems to be confirmed by the circumstances of the present case. The symptoms, however, indicated a far more violent, permanent, and general contraction, than is employed by the stomach to convey the food to the duodenum. Still its general tendency may have been the same; and it is only by supposing this to have been the case, and that the contents of the organ were powerfully propelled toward the closed pylorus, that the symptoms seem to admit of a probable explanation.

Since writing the above, we notice the account of a case which occurred in Sutton, in this State, the circumstances of which were, in many respects, remarkably similar. The patient was 19 years of age, and, like the one above mentioned, a weaver by trade. He was a voracious eater, but temperate in the use of spirituous liquors. He was attacked at 5, P.M., with violent pain at the epigastrium, which caused him to cry out "I am dying," and to throw himself on the floor, holding his bowels with his hands. The pain continued violent, and though still principally seated in the stomach, extended itself downward toward the pubic region. An emetic was administered, and followed by warm water, which vomited him several times with some relief. The pain now abated considerably, and he fell asleep. A dose of ol.

ric. was ordered every three hours till operation.

At 7, A.M., no operation from oil; bowels full, but not tender. R. Ol. Croc. gtt. ij. in six doses, at intervals of thirty minutes.—At 4, P. M., no operation; bowels fuller, with some soreness, R. Olei Ric. 3i. every hour, and blister to the abdomen.—At 8, P. M., worse: an enema was ordered, which came away unchanged.—At 4, A.M., death occurred, thirty-eight hours from the period of attack. On examination, an aperture, of $2\frac{1}{4}$ lines in diameter, was discovered in the stomach anteriorly, about half an inch from the pylorus. No mark of disease was visible around the opening, which appeared as if it had been punched out with a cutting instrument. The contents of the stomach had escaped through it.

No remarks are made on the pathology of this case by the author who reports it. If we assume, however, that the rupture was occasioned by a spasmodic contraction of the stomach, and that it occurred at the commencement of the case, the vomiting which was subsequently caused by the emetic substance, seems to correspond to that which took place spontaneously in the other case; and both would seem to prove that the tendency of the contractile action had been reversed, so as to force the contents of the stomach toward the cardiac orifice. A review of the two cases will be found to suggest some other interesting points of comparison. The particulars of the last may be found in the 8th No. of the Amer. Journ. of the Med. Sciences.

LATIN PRESCRIPTIONS.

LATIN prescriptions have been often objected to as a remnant of barbarism, and as implying a wish to make that appear obscure which is in fact very plain and intelligible. This, however, is a very erroneous notion. The scientific name of a drug is, for the most part, the only one by which it can with certainty be designated, and consequently the only one which, in writing for the article, can be employed with entire safety. In regard, however, to those plants which are well known and have popular titles, there seems no good reason for denying to a patient the satisfaction of knowing the familiar appellation of the article he is using, instead of obliging him to go on in ignorance, or manifesting an unwillingness to inform him to which of nature's productions he is indebted for his cure. Many of the most common vegetable remedies have derived some of their names from the favorable influence they have been found to exercise on the system, or from the maladies they were known to alleviate; and to those who have studied attentively the weaknesses of human nature, it will not appear an extravagant assertion, that with these simple, but attractive titles, they produced effects in former times, far beyond any of which they are capable under the more formidable appellations which they now assume. "Modern science may wrap up the meaning of its epithets in Greek and Latin terms; but in many cases they are the mere translations of these despised old vulgar names. What pleasure it must have afforded the poor sufferer

in body or in limb ; what confidence he must have felt for relief, when he knew that the good neighbor who came to bathe his wounds or assuage his inward torments, brought with him such things as allheal, breakstone, bruisewort, goutweed, feverfew, and twenty other such comfortable mitigations of his afflictions. Why, their very *names* would almost charm away the sense of pain ! The modern recipe contains no such terms of comfortable assurance ; its meanings are all dark to the sufferer, its influence unknown."

It is not so certain, then, that what we call a rose by any other name would smell as sweet. There is certainly some virtue in the words ; and if by translating a prescription into plain English, it can be rendered more grateful or efficacious, surely he would be wanting, both in skill and in humanity, who should refuse to adopt so simple an expedient.

Iodine in Dropsy.—Mr. W. Bradfield, London Wall, has favored us with the particulars of a case of dropsy, from which it appears, that after the patient had been repeatedly tapped, and her legs scarified, without any permanent beneficial result, he was induced, from reading Dr. Gardiner's treatise on iodine, to try the effects of that medicine. He gave the patient (Mercy Millham) eight drops of the tincture, in a glass of cold water, three times a day, and at the same time directed a liniment, which consisted of half an ounce of the tincture of iodine, with three ounces and a half of the compound soap liniment, to be rubbed two or three times daily over the integuments of the legs. "In two months,"

says Mr. Bradfield, "I was happy to find that my patient was able to resume her domestic employments. Her abdomen and legs are restored to their natural size, and she can walk upwards of a mile without exhaustion."

Balsam of Copaiba.—The offensive qualities of this medicine have been effectually suppressed by a chemist of Philadelphia, by a consolidation of the balsam into a consistence for forming pills. It consists of an union of the oil and resin, in which the whole of the valuable qualities of the copaiba are retained. Two four-grain pills are mentioned as equal in effect to thirty drops of the balsam.

Living Child with two Heads.—At the Academy of Sciences at Paris, on the 25th of May, M. St. Hilaire exhibited a drawing of a female child which was living at Turin at the commencement of last March, and was then ten weeks old. The lower extremities only of the monster are common to the two ; the upper part is separated, and presents the proper conformation. The priest who performed the christening, seeing in this being two separate individuals, baptised each of them ; one was called Ritta, the other Christina. They (or it) were born at Sassari in Sardinia, at the beginning of March, 1829. Their common height is that of a full-sized infant. Ritta appears in ill health. The father intends to take them to Milan, and from thence to Geneva.

REPORT OF DEATHS IN BOSTON,

The week ending August 8, at noon.

Of consumption, 2—dropsy, 1—fever and ague, 1—inflammation in the bowels, 1—insanity, 1—intemperance, 1—measles, 2—old age, 2—palsy, 1—paralysis, 1—unknown, 8. Males, 9—females, 7. Total, 16.

ADVERTISEMENTS.

BOYLSTON MEDICAL PRIZE QUESTIONS.

THE Committee appointed by the Corporation of Harvard College to adjudge the premiums established by the late Ward Nicholas Boylston, Esq., hereby give notice that the following are the subjects for Dissertations for the year 1830, viz:—

1st. Whether fever is produced by the decomposition of animal and vegetable substances; and if by both, their comparative influence.

2d. On the connexion between cutaneous diseases which are not contagious, and the internal organs.

Dissertations on these subjects must be transmitted, *post-paid*, to Thomas Welsh, M.D., Boston, on or before the first Wednesday of April, 1830.

The following are the subjects for 1831, viz:—

1st. The History of the Autumnal Diseases of New England.

2d. What insects in the United States, and particularly in the northern part, are capable of inflicting poisonous wounds; the phenomena of such wounds, and the best means of remedying their ill consequences.

Dissertations on these subjects must be transmitted as above, on or before the first Wednesday of April, 1831.

The author of the best Dissertation on each of these questions, if approved, will be entitled to a premium of Fifty Dollars, or a gold medal of equal value, at his option.

Each Dissertation must be accompanied with a sealed packet, on the outside of which shall be written some device or sentence, and on the inside of it the author's name and place of residence. The same device or sentence must be written on the Dissertation to which the packet is attached.

No Dissertation will be received which has the author's name affixed. All unsuccessful Dissertations will be deposited with the Secretary, of whom they may be obtained if applied for within a year after they have been received.

GEO. HAYWARD, *Secretary*.

N. B.—Printers of newspapers throughout the United States, are respectfully requested to give the above an insertion in their papers.

Boston, August 12th, 1829.

MEMOIR OF DR. HOLYOKE.

JUST published, and for sale by CARTER & HENDEE,—A Memoir of EDWARD A. HOLYOKE, M.D. LL.D., prepared in compliance with a vote of the Essex South District Medical Society.

Carter & Hendee have just received the American Journal of the Medical Sciences, No 8, August, 1829.—C. & H. receive subscriptions for this valuable work, and can supply the numbers from its commencement. Aug. 18.

HARVARD UNIVERSITY.

MEDICAL LECTURES.

THE MEDICAL LECTURES in Harvard University will begin in the Massachusetts Medical College, Mason-street, Boston, the third WEDNESDAY in October next, the 21st, at nine o'clock, A. M. Anatomy and Surgery, by Dr. WARREN. Chemistry, Dr. WEBSTER. Midwifery and Medical Jurisprudence, Dr. CHANNING.

Materia Medica, Dr. BIGELOW. Theory and Practice of Physic, Dr. JACKSON.

Students attending the Medical Lectures are admitted, *without fee*, to the Surgical Operations and Clinical Practice of the Massachusetts General Hospital, during the courses.

Aug. 4. W. CHANNING, *Dean*.
eoptOct21.

BERKSHIRE MEDICAL INSTITUTION.

THE Annual Course of LECTURES will commence on the first Thursday in September, and continue fifteen weeks.

Theory and Practice of Physic by H. H. CHILDS, M.D.

Anatomy and Physiology, J. D. WELLS, M.D.

Medical Jurisprudence, S. W. WILLIAMS, M.D.

Theoretical and Operative Surgery, S. WHITE, M.D. and S. P. WHITE, M.D.

Materia Medica, Pharmacy and Obstetrics, C. B. COVENTRY, M.D.

Chemistry, Botany, Mineralogy and Natural Philosophy, C. DEWY, M.D.

Matriculation ticket, \$3. Fee for Lectures, \$40. Library ticket, \$1. Graduation, \$15.50. Board, including washing, lodging and room, \$1.75 a week.

Pittsfield, July 22, 1829. aug4sept30

Published weekly, by JOHN CORREN, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

Communicated for the Boston Medical and Surgical Journal.

History of a Polypous Excrescence in the Vagina, attended with unusually severe Symptoms.

By D. H. BARD, M.D.

ON the 17th of February, 1829, I was called to see Mrs. B—— G——, of Potton, Lower Canada, aged 33, the mother of eleven children; the youngest of whom was six months old. She was rather tall, of a dark complexion, and naturally possessed a good constitution. The history that she gave me of her case was this:—She had generally enjoyed good health; her labors had been easy, and she had recovered from the effects of them in a short time, until the last (in August preceding); since which she had not been well. Upon the cessation of the lochial discharge, an excessive leucorrhœa supervened, interrupted by occasional discharges of blood from the vagina: at times these discharges were so great as to bring on extreme weakness, and confine the patient to her bed for some days. There had been much pain in the region of the uterus, of a dull, heavy, expulsive kind; and for a short time past, there had been an unnatural degree of fulness in the upper part of the vagina. Recently, she had had an attack of hemorrhage from the uterus, and she was then unable

to sit up, in consequence of the debility produced by it. Her bowels had been tolerably regular; appetite moderately good; and her sleep comfortable. She at this time presented the appearance of a patient exhausted by leuco-phlegmatic discharges, and her digestive organs were evidently somewhat deranged: her face was pale; she had a gnawing, faint distress at the stomach; her tongue was pale and glabrous; pulse feeble, but not unusually frequent; appetite indifferent, and bowels rather slow. She had pain in the back and loins, and a dull uneasy sensation in the pelvis.

On making an examination per vaginam, I found a polypous concretion attached to the upper and anterior portion of the vagina, a little inclined to the right side. Its attachment commenced at that portion of the vaginal cord which is reflected over the neck of the uterus, and extended downward about half way to the meatus urinaris; its neck was short and thick, and its body flattish, projecting about a finger's breadth beyond the neck on all sides round; it had a soft granulous feel, resembling a placenta enveloped in its membranes, from which it would have been difficult for the touch to have distinguished it, though it was rather firmer than a healthy placenta: blood oozed out of it on handling. The patient thought there was an

obscure sense of feeling in it when touched ; but it was difficult to tell whether this sensation was in the excrescence itself, or was communicated by percussion to the part from which it took its origin, or those with which it came in contact. The os uteri was in its usual place, its edges thickened, inflamed, and hard. The uterus was *in situ naturale*, and was distinctly felt between the fingers of one hand in the vagina, and the other on the abdomen. I should think it was not enlarged.

I informed the patient of the nature of the case ; that the foundation of her difficulties was the diseased structure in the vagina, and that no plan of general treatment would be successful until that was removed ; that it was possible something might be done by astringent and stimulating applications to the part, but that the ligature afforded the most probable chance of success. The former mode, being most congenial to the patient's feelings and those of her friends, as well as my own present views of the case, was adopted. Injections of an astringent and stimulating nature, as sulphate of zinc, acetate of lead, *sanguinaria canadensis*, &c., were directed to be thrown into the vagina, and such general and constitutional means as appeared to be indicated were resorted to.

At the end of four weeks there had been no hemorrhage, and the patient's strength was improved : she could walk a few steps, had a good appetite, slept well, and her bowels were regular ; but it was evident the constitution was laboring under a heavy burden, or that it had been too largely drawn upon, readily to regain its former health and firmness. The surface was

pale ; the tongue pale, smooth, and shining ; there was debility of the digestive organs, and every function seemed suffering from want of energy and freedom of action. There was a dull, heavy, uneasy sensation in the pelvis, and a constant discharge of a whitish foetid fluid from the vagina. The polypus had increased in size, so as now to distend the vagina some ; the diameter of the neck increasing in the same proportion as the body. I now, as I had before done, urged the removal of the polypus by ligature. To this the patient's friends were opposed, and she would not submit. I was therefore forced to abandon the object.

On the 2d of April, I was called in haste to visit her, the messenger informing me that it was doubtful whether she lived till I arrived. On reaching the patient's house, I learned that for four or five days past she had had more pain in the region of the uterus ; some sanguineous discharge from the vagina ; her appetite had failed ; she had a slight diarrhoea, and her strength had departed rapidly. This morning the uterine pain, attended with a strong expulsive effort like that of labor, became severe ; large coagula of blood soon appeared, which the patient removed from the vagina with her hands ; and these were soon followed by profuse hemorrhage, which continued without intermission until the patient, exhausted and bloodless, fell into deep faintings and was supposed to be dying. Cold had been applied to the abdomen and genitals, and astringents had been given internally. When I saw her, the hemorrhage had ceased ; her pulse were just perceptible at the wrist ; voice sunk to a whisper ; face and lips bleached ; extremities cold ;

very faint, but quiet.—Tr. Opii et Ol. Cinnamom. were given in suitable quantities, and beef-tea with bread, directed for food. She passed a tolerably comfortable night, and began immediately to improve, and continued to do so until April 9th, when she had another similar attack of flooding, which was again stopped by deep fainting.

On the 10th, I made an examination per vaginam. The excrescence had increased in size rapidly since the last examination. The longitudinal diameter of its neck was much increased, extending from within one half or three-fourths of an inch of the orifice of the urethra, up the vagina as far as the examination could be continued,—probably to the point where it was found attached on the first examination. The transverse diameter was equal to one-fourth the circumference of the vagina, and its body occupied nearly the whole recto-vaginal cavity, pressing the rectum backward, and resting on the perineum. The body of the polypus was divided by deep fissures into distinct lobes ;—whether these fissures extended to its base, was not ascertained. The texture was nearly the same as it was when first examined, though the granulated feel was not so evident. I now requested a consultation, and Dr. S. S. Butter, of East Berkshire, was called.

April 11th.—Saw her with Dr. Butter. She appeared rather improved ; strength gaining ; appetite good ; bowels free. There has been no hemorrhage since the 9th ; but the discharge mentioned before still continues in great quantities. There are wandering pains in the head, back, limbs, abdomen, etc. : the emaciation is not great, but the

muscles are flabby and the skin pale ; pulse about 100 ; tongue the same as it ever has been, smooth, pale, and shining. The case presented the aspect of utter hopelessness. Still it was thought best not to look idly on ; and after an attentive consideration of it in all its bearings, we came to the following conclusions :—That, unless this diseased structure can be removed, the patient cannot long survive ;—that, although all operations of this kind are attended with more or less danger, yet in this case there is little to be apprehended ; and that the enclosure of the polypus in a ligature may, by preventing hemorrhage, prolong (if it does no more) the patient's life ;—that, if no more than half can be enclosed in a ligature, the removal of this portion may destroy the organic life of the remainder, and it may be removed spontaneously, or it can be removed by another operation.—Our opinion being communicated to the patient and her friends, they acquiesced.

12th.—Had a bad night ; some slight hemorrhage ; pain and sense of heat in the pelvis, back, and loins ; pulse small and quick ; much exhausted and restless. After a large dose of Tr. Opii had been given, the patient was laid upon the edge of a firm seat, her head and shoulders being raised and supported by an assistant, and her legs flexed and separated as far as convenient. As the tumor filled the vagina, it was necessary to dilate the external parts somewhat ;—this being done, a canula, containing a firm waxed linen ligature, was introduced into the posterior part of the vagina, between the polypus and the rectum, and retained there. The bow of the ligature, which was left large, was then thrown over the anterior and

inferior portions of the tumor, and pushed upon all sides round, until it passed over its projecting edge, as far up as it could be reached. The ligature then passed over the body of the polypus to the point of the canula, and being properly adjusted, was gradually tightened. Near the pubis, where it is mentioned the neck of the tumor approaches near the orifice of the urethra, when the ligature was tightened, that portion of the vagina which gave origin to this part was put upon the stretch, and the patient complained of some pain and tightness across the lower part of the abdomen;—this, however, soon subsided, and she was put into bed more comfortable than was anticipated. A cloth wet with diluted alcohol was applied to the genitals, and she was directed to take a little wine through the afternoon.

15th.—Morning. Rested very well last night: more strength to-day; no pain or soreness about the genitals. She was now ordered to take bark and wine, in such quantities as the stomach would bear, to use a nutritious diet, and keep the bowels free. The ligature was tightened a very little to-day without inconvenience.

For the three first days she appeared to be improving; her strength and appetite were better, and she suffered no inconvenience from the ligature, though it occasioned pain if much force was used in tightening it. During this time, I found that when the force was so applied to the ligature that it acted on the posterior part of the polypus only, it gave no uneasiness, even when I exerted all the force I thought prudent. But when it was so applied as to act equally on each part of the

circumference of that portion of the excrescence included in it, she complained of pain like that mentioned when the ligature was first applied, although the degree of force exerted was small. To this, and the bulk of the tumor, was probably owing the tardy progress made by the ligature, and the length of time it occupied in effecting its object.

On the evening of the 15th, from the ligature having been too tightly drawn that day, there came on pain in the lower belly, back, loins, and shooting down the thigh, headach, and some preternatural heat. These symptoms were soon removed by loosening the ligature, applying cold to the abdomen and genitals, and opening the bowels; and though she did not appear so well as during the first three days, yet she was comfortable on the 17th, and continued so until the 21st, when the ligature came away, and with it about one half the polypus.

On examining the vagina, I found the lower portion of it free, the upper part filled with the remaining portion of the polypus, which felt lax and softer, and seemed to have lost its vital forces. That portion of the vaginal coat from which the excrescence had been removed, was thickened, irregular, and a little tender. She did not complain of soreness anywhere else. The patient was encouraged, and appeared rather improved; it was evident, however, that recovery would not take place. The whole surface was deadly pale; her eyes were heavy and sunken; tongue pale and smooth; abdomen rather full; bowels slow; nutrition imperfect; and occasional wandering pains in different parts.

A course of treatment having for its object the restoration of the digestive functions, and recruiting the strength and energy of the whole system, was instituted. A weak solution of soap to be injected into the vagina while any soreness remains, and then an infusion of *Sanguinaria Canadensis*, of such strength as the parts will bear.

After this time she failed gradually: the discharges from the vagina were larger in quantity, of a light whey color, occasionally intermixed with grumous blood, and so foetid that the atmosphere of the patient's house was hardly tolerable. The polypous concretion diminished in size gradually: on the 10th of June, when the last examination was made, it was not one-fourth as large as when the ligature was removed, and the bulk of what remained was rapidly lessening. At the same time her strength was failing, though indeed she had not much to lose: the deranged state of the digestive organs was increasing, and the fugitive pains before mentioned grew more distressing and exhausted her much. I made a note on the 19th of May, which states that she is very feeble; has vomited several times a day for a week past; a two-grain pill, composed of equal parts calomel and soap, that she has taken daily for a few days past, has purged her much; there is a little taste in the mouth; no appetite; "trembling," as she expresses it, "at the stomach;" skin hot, but pallid; acute, and almost intolerable pain, generally about the abdomen, sometimes in the chest, and at others in the limbs: this pain is not constant, and after one organ has suffered a few hours, it

will remit and soon appear again in another place. Every day, for some days past, she has had a paroxysm of fever;—pulse small and frequent; tongue the same as it ever has been; emaciation great. An emetic of *ipeacacuanha* relieved the vomiting, and the heat for a time was less; but she had occasional and distressing paroxysms of heat as long as she lived, and a diarrhoea came on which resisted all treatment.

On the 7th of June, she was suddenly seized with severe pain in, and great swelling of, the right inferior extremity, from the toes to the labium pudendi. I saw her soon after the pain and swelling commenced. The pulse, tongue, and skin, were the same as they had been; no pain in any other part, except the swelled limb, which was more than twice its natural size, pale, glabrous, oedematous, and cool; the pain was excessively sharp: there was no discoloration, nor any irregular hardness whatever, but the limb presented a perfectly smooth and equal surface. The swelling of this leg was sudden;—according to the nurse's account, it was not an hour from the time it commenced before it had reached its extent;—it should be remarked, however, that there had been a bloated oedematous state of the feet and ankles for a long time.

Blisters applied to the points about which the pain centred, and frictions with anodyne and camphorated oil, relieved the pain in the leg, or rendered it from time to time tolerable; but the swelling never subsided.

In this condition,—wasted by a constant and uncontrollable diarrhoea; racked with pain that nothing would but for a short time

assuage; destitute almost entirely of muscular strength; parched, a great part of the time, with unquenchable thirst, and tormented with an excessive heat of surface, which came on in irregular paroxysms; without appetite, and taking but very little food, a little wine, and an occasional dose of opium,—life lingered on, in a mere breathing skeleton, till the 9th of July.

An examination post-mortem could not be obtained.

Query,—did the local disease, in this case, exert any *specific* effect upon the constitution?—if so, what was its nature?

North Troy, Vt., August, 1829.

II.

CRAMP OF THE STOMACH.

The following summary of a paper in the Glasgow Medical and Surgical Journal, is extracted from the Medical Gazette. The observations were original with John Macfarlane, M.D., of the former city, and since they are the result of his experience, may enlighten the views and serve, perhaps, to direct the practice of others.

SPASM of the stomach, although often sudden in its attack, urgent in its symptoms, and alarming in its appearance, has been either altogether overlooked by the majority of authors, or noticed only in the most cursory manner, as an occasional attendant on dyspepsia. It is, however, an important, frequently-occurring, dangerous, and sometimes fatal variety of stomachic disease. Its symptoms are in general well-marked and diagnostic. The treatment requires to be prompt, powerful, and peculiar; and al-

though in several cases it may be connected with a previously existing derangement in the functions of the affected organ, yet in others, and these by no means rare, it originates suddenly from distant irritation, or without any previous morbid indication.

When spasm affects the stomach there is the most acute pain, with a feeling of rigid contraction, violent twisting or tearing in the epigastrium, soon followed by painful and interrupted breathing, difficult articulation, pallid countenance, small, hurried, and contracted pulse, and occasionally with coldness of the extremities and rigid contraction of the recti abdominis and gastrocnemii muscles.

In severe forms of the disease, the patient usually complains of a sensation of rigid contraction or drawing together in the epigastric region, occasioned by the inordinate contraction of the muscular coat of the stomach, and occasionally producing a hard circumscribed tumor perceptible to touch. When, however, the abdominal muscles participate in the spasm, the tension and inequality of surface produced by the morbid contraction of the recti abdominis, effectually prevent the discovery of this tumor. The diaphragm, it is presumed, very soon sympathizes with this state of the stomach, and becomes also spasmodically affected, as the short, interrupted, and highly-distressed respiration, and the difficult articulation, evidently show. Indeed, every person who has seen a violent attack of this complaint, must have observed the change in the respiration which takes place at the height of the paroxysm; the difficulty, and often the impossibility

ty, of performing inspiration and expiration even in an obstructed manner, and the half-suppressed cries or moans which the patient utters, apparently occasioned by the rigidly contracted diaphragm, remaining as an almost immoveable partition between the thorax and abdomen. If the hand is applied either to the thorax or epigastrium, we can seldom discover the alternate elevations and depressions of these parts indicative of a natural state of breathing.

With respect to the causes of the disease, the author has seen several instances where it was produced by great mental anxiety. In some cases, where a strong disgust or antipathy exists to certain dietetic articles, any attempt to eat them, or even simply naming them to the patient, has been followed by severe spasmodic affections of the stomach. But the cases are, however, far more numerous in which the disease is produced, not through the influence of the imagination, but from the introduction into the stomach of some substance, which, from peculiar idiosyncrasy, acts on this organ as a morbid irritant. In addition to these exciting causes may be ranked, sudden exposure to cold, drinking cold liquids while the body is heated, coldness of the lower extremities, intemperance, &c.

“Females are more subject to this disease than males, in the proportion of $2\frac{1}{2}$ to 1. Accordingly, of 36 cases which I have seen, 26 occurred in females and 10 in males; and in 12 of these, no affection of the stomach, or other predisposing cause, could be discovered.—Irritation in the uterus is also said to be a frequent cause of spasm of the stomach.

Cullen says, that ‘the ordinary flow of the menstrual discharge retarded, or totally suppressed, affects the stomach, and disposes it to be affected more readily with spasm.’”

When long continued, spasm of the stomach is apt to induce inflammation of this organ. The occurrence of violent hæmatemesis during a paroxysm of spasm of the stomach, probably occasioned by a partial laceration of the internal coat of that viscus, is illustrated by a case,—in which the patient recovered.

An interesting case is related where death took place in little more than an hour from the commencement of the spasm, and where, although the body was not allowed to be examined, the author thinks the fatal event was produced by laceration of the stomach from the violence of the spasms.

In another instance, where the symptoms were well marked, and the history of which is given, a lacerated opening was found in the stomach on dissection, without the slightest vestige of organic disease, of gangrene, erosion, or ulceration.

The disease may prove fatal without inducing any lesion of the stomach, and an instance of this kind is detailed, where, on dissection, the only morbid appearance that could be discovered by the most accurate investigation, was general softening of the cerebellum, with vascular turgescence in the base of the brain.

In the *treatment* of spasm of the stomach, where we find it occurring in individuals whose general health has been impaired by confinement or sedentary employments, or who have suffered

from anxiety, fatigue, or exhaustion, and who are free from stomachic ailments, the author has found the paroxysms frequently subdued by a drachm of sulphuric æther with 50 drops of laudanum, its good effects being sometimes instantaneous; while in other cases the dose required to be repeated two, three, or even four times, before relaxation of the spasm was effected. In a few other cases the same decisive results were obtained, although the medicine was speedily rejected by vomiting. "On one occasion, (says the author,) when I was about to operate on a woman for strangulated hernia, the husband, a stout robust man, on account of anxiety for his wife, was suddenly seized with nausea and slight vomiting, followed by excruciating pain in the region of the stomach, and the other symptoms of violent spasm. A bladder containing pounded ice, which had been applied to the hernia, was laid over the epigastrium, and with the happiest effects, for in less than five minutes the pain was removed. This application is much recommended by M. Barras in neuralgia of the stomach; but I have had no other opportunity of trying its efficacy." When the attack is produced by the introduction into the stomach of some morbid irritant, the speediest relief will be obtained by the exhibition of an emetic.

"I have in two cases seen the most marked advantage from venesection; and that when, from the aspect of the patients, the cold clammy state of the skin, and the feebleness of the pulse, the reverse of this treatment seemed to be indicated."

When the recurrence of this

disease is connected with functional derangement of the stomach, much benefit is found from small doses of quinine, but especially from the use of the subnitrate of bismuth. When the attack is excited by depraved intestinal secretions, or by constipation, which frequently happens, more benefit is to be derived from mild laxatives and alteratives, than from strong or drastic purges. The diet should, of course, be strictly attended to, and such articles selected as are light and of easy digestion; for when the stomach is much stimulated, either by the quantity or quality of the food, spasmodic excitement, more or less powerful, is not unfrequently produced.

III.

TARTAR ON THE TEETH.

MANY hypotheses have been published respecting the nature and source of the earthy material which accumulates on the teeth, termed tartar.

Professor Berzelius, in a work on animal chemistry, says, when it first settles on the teeth it is more hardened mucus, and that during its decomposition, phosphate of lime is produced, which adheres firmly to the enamel. M. Serres says that it is secreted by minute distinct glands, and not a deposit from the saliva. Professor Hertz, in his popular treatise, considers it a consolidated morbid secretion of relaxed or irritated gums; and many dentists attribute it to decomposition of animal and vegetable food lodged between the teeth. Mr. La Beaume has lately ascertained, by microscopical examination, that this collection is produced in the

same manner as coral, by animalculæ resembling the *medrepora oculata*. By means of a solar microscope of strong magnifying power, we have seen them in a very lively state ; and, from the cellular organization of the tartar, we have no doubt of the correctness of Mr. La Beaume's theory. The same has been observed by Mr. Cooper, a scientific chemist and geologist of London. Mr. La Beaume is decidedly of opinion that, after the tartar, which, like coral, is a mere nidus, adheres firmly to the teeth, the animalculæ burrow into the teeth, and, by insinuating themselves between the teeth and gum, occasion disease in both ; but the secretion from them is often so offensive as to contaminate the breath. Mr. La Beaume has made numerous experiments with different mineral, vegetable, and animal acid, and with alcohol, to ascertain their effects on the animalculæ and on their habitation, and it is a curious fact, that of all the articles he has employed, the true *vinegar* acid, (not the pyroligneous acid, which is now generally sold for it,) almost instantaneously killed the animalculæ, and acted powerfully in decomposing the concretions, so that they were easily removed by a brush. The more powerful acids, in the same state of dilution, and alcohol, seemed to have little effect on the animalculæ. In order to destroy the animalculæ and their eggs, and to decompose the production which protects them, Mr. La Beaume recommends the teeth to be brushed every morning with the *vinegar* acid, (*acidum aceticum verum*,) diluted with rose water, and immediately afterwards to make use of the levigated areca nut charcoal, as re-

commended by Professor Hertz, in his popular Treatise on the Management of the Teeth.

The use of the diluted acetic acid every morning will, in the course of a few days, entirely remove the tartar, and the regular employment of the areca charcoal and tincture of rhatany every, or every other, morning, will effectually prevent the generation of the animalculæ.

IV.

INFIDELITY OF THE MEDICAL PROFESSION.

Being Part of Dr. Allen's Address occasioned by the Death of Dr. Smith.

You may be aware, that the charge of utter regardlessness of religion, and even of undisguised infidelity, is often brought against the medical profession. But it may be well doubted, whether physicians are peculiarly obnoxious to the disreputable charge. There have unquestionless been many infidel physicians; but there have been infidels, also, in other professions, and among other classes of men.

If, among our eminent physicians, there have been some unbelievers, there have also been conspicuous Christians ; such were, in foreign countries, SYDENHAM, BOERHAAVE, and HALLER. Need I speak of RAMSAY, of South Carolina, the American historian, who was for many years a worthy member of a Congregational church, and who, although he fell by the hand of a maniac-assassin, yet died in the utmost tranquillity and serenity, relying on the mercy of God through the blood of the Redeemer ?—Need I speak of REDMAN, of Philadelphia, eminent

for piety, and a faithful elder of the Presbyterian church? Much of his time at home was spent in reading pious books, and in the offices of devotion. Of death, and of the scenes which await the soul in the world of spirits, he was accustomed to converse with the utmost cheerfulness.—Need I speak of RIDGELY, of Delaware, a member of the Episcopal church, who was particularly attentive to the moral and religious education of his children, regarding merely intellectual culture, without the discipline of the passions and of the heart, without efforts to bring the youthful mind under the influence of virtue and piety, as only giving wings to the pestilence, or as putting power into hands which would employ it for purposes of evil. Hence it was, that he earnestly recommended to his children, and to all around him, the diligent study of the word of God.—Need I speak of the illustrious RUSH, who deemed riches and fame as incomparably less valuable than the religious principles which he received from his parents, and who was accustomed, at the close of every day, to read in his family a chapter of the Bible, and then to address God in prayer?—Need I speak of MON-

SON, the head of the Medical Society of Connecticut, religious in youth and religious in old age, who could be the spiritual teacher of his sinking patient, and was accustomed, at his bedside, to commend his departing soul to the mercy of God, and who himself died in the triumphs of Christian hope?—Need I speak of BOWEN, of Providence, who himself suffered for years an agonizing disease, but who found in the sublime doctrines and gracious promises of the gospel, the support and consolation which the sufferer can derive from no other source; and who passed through the fiery furnace to come out, as his friends are persuaded, like gold from the hands of the refiner,—dying with a humble, cheerful reliance on the blood of the Redeemer?—Or need I speak of our own MITCHELL, of Maine, whose departure from the earth was not through the lingering pains of the sick-bed, but sudden as the lightning-glance from heaven; and who, by his habitual ardent piety, by the manifestations of a heart at all times kindled by the truths and hopes of the gospel, seemed to be always ready to wing his flight to another and a better world?

BOSTON, TUESDAY, AUGUST 25, 1829.

MEDICAL PROSECUTIONS.

THE following case appears to be one of considerable interest to the profession in this country, as well as abroad.—Mr. Van Butchell, a surgeon in London, performed an operation, probably for stricture of the rectum, though this is not stated.

The patient, however, died; and on examination, the intestine was found to have received considerable injury. Mr. Van B. was tried for manslaughter, but acquitted. The following is a part of Mr. Baron Hullock's charge to the jury:—

“If such an indictment could be

supported, in the total absence of all evidence of want of skill or neglect, because an operation failed, the consequences would be most serious, whether the operation was performed by a regular or an irregular surgeon; and surely it would be most unjust to prosecute a man who might be a skilful and clever practitioner, upon the unsuccessful result of a dangerous operation, because he was not licensed, and not fortunate enough to possess the sanction and authority of a certain body in this town. If such a doctrine could be maintained, very many persons in remote parts would be unable to procure any assistance; for who would exercise their best skill, of whatever quality it might be, if in the case of failure they were to be subjected to an indictment for murder or manslaughter? It was somewhat remarkable that there was not a single decision on the point, which must show that all the most eminent lawyers had strong doubts of the propriety of such prosecutions, and that it was their uniform opinion. They were not for the first time to be told that operations would fail; but it was too much to say that, because they failed, the parties were to be subjected to a prosecution. What had been quoted from Blackstone was, in fact, a copy of what Lord Hale had said of cases of this description; but the words of his lordship would not bear a construction unfavorable to the person accused; it went to a direct and opposite tendency. The words of his lordship were, 'If a physician gives a person a potion without any intent of doing him any bodily hurt, but with an intent to cure or prevent a disease, and, contrary to the expectation of the physician, it kills him, this is no homicide; and the like of a chirurgion; and I hold that opinion to be erroneous, that thinketh if he be no licensed chirurgion or physician that occasioneth this mischance, that then it is felony; for physic and salves were before licensed physicians and

chirurgions, and therefore, if they be not licensed according to the statutes of King Henry VIII., they are subject to the penalties in those statutes; but God forbid that any mischance of this kind should make any person not licensed, guilty of murder or manslaughter.' Cases might and did occur, where the parties recovered damages in a civil action for unskilful conduct; but God forbid that any person, under such circumstances, should be subjected to an indictment for murder or manslaughter; for, in that case, many would die for want of help, the helpers well knowing that, if they failed, they would be liable to such an indictment."

The justice of these remarks is almost self-evident; but it appears to us that the same general principles of equity which protect physicians in indictments in such cases, ought to be their safeguard, also, in civil suits, brought by the party who was the subject of treatment, or by his friends, when that treatment has been unsuccessful, or the practitioner has deceived himself in the diagnosis of a disease. Of this species of trial we have had some examples in this country; and they ought to be most strongly discountenanced, both within and without the limits of the profession. As an example of the ground on which such prosecutions have been instituted, we will suppose the following case:—An individual of respectable talents and with a good medical education, heroically devotes himself to the arduous and unthankful duties of a country practice. Extending his labors over an undefined and almost unlimited territory, he drives and is driven from house to house, from village to vil-

lage, by day and by night, from year's end to year's end, and is grudgingly rewarded in return with a bare subsistence for himself and his family. In the mean time, he sees scarce more practice in a month, than a practitioner in town can, with fair opportunities, witness in a day; knows little of the improvements taking place in his art; and hardly hears of, much less sees, a hospital. After proceeding in this manner for ten years,—time enough to rust out all the knowledge he ever possessed,—he is suddenly presented with a difficult surgical case, perhaps extremely obscure in its nature, and requiring a thorough knowledge of the state of parts for its treatment. Under these circumstances, he forms the best diagnosis in his power, and treats the case accordingly. The result proves that the diagnosis was incorrect, and the treatment injudicious; the patient is rendered a cripple for life, whereas if the case had been understood, he might have been restored to health and strength. In consequence, a suit is instituted against the physician, and the damages are laid at what the injured party might have earned, if in good health, over and above his probable earnings in his present state; for this, if anything, is the amount of injury inflicted. If claims like this were once admitted, what would be the consequence? Not, certainly, that physicians would become wiser or better informed than at present; but that, in emergencies such as we have mentioned, they would refuse to act at all, rather than incur a responsibility so dangerous. We have adopted

a particular statement of facts in the above supposition, because similar facts are known to have happened within no long interval of time. The principle, however, applies equally to surgical operations which have been unskilfully performed and followed by death. The idea of making the physician responsible, either in his property or his person, for the event of his well-meant endeavors to save the life of his patient, is perfectly barbarous, and wholly unworthy of a civilized people.

But it may be said, that although the regularly educated and licensed practitioner should be exempted from this responsibility, such protection is not due to the ignorant charlatan who poisons with his drugs, or to the untaught operator who murders with his knife. But as the principle avowed by Lord Hale, goes to the extent of protecting these, also, in their persons, it is not easy to see how justice can refuse them the same privilege in regard to their property. It is still the *quo animo*, the intention of the party, which forms the distinction between crime and innocence, between benevolence and malice. He who employs a physician knowing him to be ignorant, or even not knowing him to be learned, since those who have received a regular education can always procure credentials to that effect, does it at his own risk, and ought to be responsible for the consequences.

Another circumstance, too, ought not to pass unnoticed, as it goes very pointedly to discountenance medical prosecutions and suits for malpractice. It is the extreme difficulty,—

the impossibility in some cases,—of deciding, even in a court of law, what malpraxis is; whether an operation has been done well or ill; whether the unfortunate result is to be attributed to the bad conduct of the knife, or the injudicious administration of the drug. This difficulty has its foundation in the uncertainty of the healing art; and as this uncertainty must, in the nature of things, always exist, there can be no hope that the difficulty will ever be removed. Scarce a trial is on record which does not show it in strong relief. Take, for example, the last of which we have any account. It occurred at Troy, in the State of New-York.—A medical gentleman, by name M'Lellan, was prosecuted for malpractice as a surgeon; he having employed *permanent extension* of the limb in a case of fracture, whereas the patient, being crippled, imagined it owing entirely to the method pursued by this medical attendant. *Friends* were not wanting to urge the correctness of this notion, and assure him "that a *fixed position* of the knee joint was the best, and only safe and proper position of the limb, in cases of this kind."—At the trial, three of the profession testified that the mode of treatment adopted in the case was erroneous, and productive of injury to the patient; and three others made a statement precisely the reverse. A week was occupied in the proceedings, and the result was, a verdict of six cents for the defendant.

It is the duty of the profession to prevent, if possible, occurrences so degrading to their character; and

this can only be accomplished by their uniform determination, when called upon in doubtful cases, to give the most favorable views of the conduct of each other. Unless the circumstances of the case are fully known, and show that the practitioner acted in defiance of all authority, another physician is not bound in duty to condemn his proceeding; and he who does so, seems to us neither to consult the dignity of the body to which he belongs, nor his own eventual interest.

NEW MODE OF OBTAINING THE SULPHATE OF QUININE.

THE following mode of preparing this valuable medicine, lately proposed by M. Cassola, seems to be far less expensive and troublesome than the one usually employed.

Two pounds of powdered yellow bark are boiled, for a quarter of an hour, in a pint of water, in which one ounce and a half of caustic potash has been dissolved. The decoction is filtered and expressed, and water poured on the remainder as long as it is colored by it. The residuum is now boiled for twenty minutes in twelve pints of water, to which an ounce of sulphuric acid has been added; the decoction is filtered and washed as before, and the remainder boiled in the same quantity of water, with a drachm of sulphuric acid. The acidulated decoctions are now mixed, and powdered chalk added to them, in order to saturate the excess of acid, and to precipitate the coloring matter; the fluid is filtered, and a sufficient quantity of subcarbonate of potash added to it; the precipitate is collected, washed, and boiled, in six times its weight of alcohol, at 40 deg.; the decoction being filtered and evaporated to one-third, five times the quantity of water is added to the rest, and all the alco-

hol driven off by a gentle heat. The quinine is now saturated with a few drops of sulphuric acid, by the admixture of which the fluid becomes perfectly clear, and is filtered almost in a boiling state, after a small quantity of chalk has been added. As soon as the fluid cools, the sulphate of quinine is deposited in white acicular crystals.—*Gazette de Santé*.

New Mode of administering Quinine.—Four cases of facial neuralgia, which resisted the ordinary treatment, yielded to the administration of one grain of powdered quinine, in two grains of snuff, mixed and used as common snuff. This dose was always sufficient, and in from two to three days the patients were cured, as if by enchantment. The cases occurred to Dr. Richet, of Metz, and are related in his thesis presented to the Faculty of Medicine of Strasbourg.

Dropsy of the Pericardium.—The London Medical and Physical Journal for May last, contains an account of a case of dropsy of the pericardium, by F. W. Wood, Esq., in which the pericardium contained *two quarts* of a perfectly limpid fluid. We may mention, also, that "the outer coat of the pericardium had a thin shining appearance, whilst on the inside were deposited layers of coagulable lymph resembling the rugæ on the stomach of the cow. The heart was also covered with a similar deposit; its parietes were much thickened, and it appeared as if fore-shortened, the apex being pressed upwards. In the left ventricle was a portion of coagulable lymph, of a yellow sizy appearance, of nearly an ounce weight. The *carneæ columnæ* were much enlarged; the valves free from any apparent disease. The structure of the lungs was perfectly unimpaired."

Singular Treatment of Tetanus.—The following extraordinary practice for the cure of this disease, prevails amongst the inhabitants of the

Tonga or Friendly Islands, in the South Pacific Ocean; among whom, it is said, that traumatic tetanus prevails to a great extent.—It consists in producing a considerable degree of irritation in the urethra, and discharge of blood, by the introduction of a reed of proper size, for some distance into the canal; and, when the case is very violent, a cord is passed along the urethra, and carried through the perineum. The two ends are then occasionally pulled to and fro, inducing great pain and a copious hemorrhage, with much swelling and inflammation of the penis. Two cures of confirmed tetanus are related by a gentleman of the name of Mariner, to Professor Chapman, of Pennsylvania, as having been performed by this strange and unpromising practice. The mode may suggest a principle capable of improvement.—*Lancet*.

Mesmerism.—Amongst the stories which are reviving in Paris, in consequence of the operation which we lately mentioned as having been performed by M. Cloquet on a female, while supposed to be in a state of insensibility from "magnetic influence," is one of a madman, who, some years ago, it is alleged, requested and suffered another madman to cut off his head. The operator proceeded slowly, with a very bad knife, but the patient submitted quietly, and without uttering a cry.—Another story is, that a female, who was in the Salpêtrière two years since, used to devour her own flesh until every part of the body which she could get at was terribly mutilated.—A third account is given of a female, named De Barre, who nailed herself to a cross, and remained there an hour, "with a tranquil air, her eyes frequently closed, speaking first to one, then to another, and saying that it was very pleasant." But, generally speaking, the French are very sceptical as to M. Cloquet's case. There is, however, an official

discussion now proceeding, which will undoubtedly produce the same result as the commission which was appointed in the better days of animal magnetism in London.

By far the most interesting of the cases which have yet occurred in the practice of animal magnetizers, are those in which the patients have been females, and pregnancy one of the results. This curious effect, at one time, made magnetizing a highly popular operation.—*Ib.*

Conceptions.—In a memoir on the influence of the seasons, climates, periods of labor and repose, abundance or scarcity of provisions, and social habits, on the number of conceptions in women, M. Villermé states as one of his conclusions, that the six months of the year in which there are the most births, occur in the following order:—February, March, January, April, November, September. These refer the conceptions to the months of May, June, April, July, February, and March. He regards the same agent which produces marsh miasm, as amongst the greatest obstacles connected with climate, (and therefore, indeed, with season,) to fertility. In the year 1817, one of great scarcity of provisions in the eastern part of France, a diminution of the number of conceptions by one half of the ordinary number, was a very marked result.

Bleeding from Leech-bites.—Many remedies have been made public. Dr. Löwenhardt, of Berlin, adds another, which he mentions as being successful and simple: it is that of drawing the edges of the wound together with a fine needle and thread; the thread being passed through the cuticle only, no pain is occasioned, and the bleeding is at once suppressed.

Iodine in Gout.—This medicine has been repeatedly employed with success in gout, by M. Gendrin, the Editor of the *Journ. Gén. de Méd.* He applies it externally and internal-

ly in frictions, vapor, tinctures, alkaline solution, and enema. He has tried it in about thirty cases, and in every one of them the patients were either cured in a few days, or their condition rapidly ameliorated. In no instance has he found it productive of injurious effects.

Dressers.—In all the Italian hospitals there are a number of young men, from 20 to 30, who perform almost the same functions as the dressers in the London hospitals, but live in the institution, and are lodged and fed at the expense of government. They receive about *three shillings a month* salary.

Connected with this process in the above hospitals, is a peculiar method of using adhesive straps.—The strap is cut very broad at the extremities, and narrow in the centre, so that it is enabled to take a firm hold of the edges of the wound, and exert a considerable power in retaining them in contact; while large spaces are left between each slip in the middle, which permits the free discharge of the pus and ligatures.—*Med. and Phys. Journal.*

The Sun-flower.—It is said the seeds of the common sunflower will yield from 5 to 7 quarts of oil to the bushel; and that this oil is equal to that prepared from olives as a condiment, to sperm oil in elamping, and to linseed oil in painting. The stocks are a good substitute for hemp in manufacturing pack-thread, and the young flower-cups are not inferior to the artichoke as an article of diet.

SKETCHES.—Our foreign journals arrived too late to be of use in this number of the Journal.

REPORT OF DEATHS IN BOSTON,

The week ending August 14, at noon.

Of canker, 1—canker in the bowels, 2—consumption, 6—convulsions, 2—childbed, 1—dysentery, 2—hooping-cough, 1—measles, 2—mortification, 2—typhous fever, 1. Males, 12—females, 9. Total, 21.

ADVERTISEMENTS.

MEDICAL INSTRUCTION.

A COURSE of Private Instruction, for the education of Medical Students, will begin on the 1st of September next, under the direction of the subscribers. The students will be regularly examined and instructed. They will have an opportunity of attending the Medical and Surgical practice and operations in the Massachusetts General Hospital; and Clinical Lectures will be given to them occasionally.

Further information on the subject may be obtained by application to either of the subscribers.

JOHN C. WARREN,
GEO. HAYWARD,
ENOC HALE, JR.

Boston, Aug. 17, 1829. aug25—3t.

MEMOIRS OF DR. GOOD.

JUST published and for sale by CARTER & HENDEE, Memoirs of the Life, Writings, and Character, Literary, Professional, and Religious, of the late JOHN MASON GOOD, M.D. F.R.S. F.R.S.L. Mem. Am. Phil. Soc. and F.L.S. of Philadelphia, &c. &c. By OLINTHUS GREGORY, LL.D. Aug. 11.

NEW LONDON WORK.

JUST received, by CARTER & HENDEE, corner of Washington and School streets, A Chemical Catechism; in which the Elements of Chemistry, with the recent discoveries in the Science, are clearly and fully explained. Illustrated by Notes, Engravings and Tables, and containing an Appendix of select Experiments, &c. By THOMAS GRAHAM, M.D. Member of the Royal College of Surgeons in London, &c. &c.

C. & H. have also just received, Elements of Chemistry. By ANDREW FYFE, M.D. F.R.S.E.

CONSOLIDATED COPAIVA.

"COPAIVA may be given in this form without the least inconvenience. Neither communicating taste, nor imparting odor to the breath, it is also retained without the least disquietude or uneasiness to the stomach; and I am informed

by Dr. Roseman, that in large doses it does not purge."—*Phil. Journal of Med. Sciences.*

See an article in this Journal, Aug. 18th.

OIL OF BLACK PEPPER.

This is a much more active preparation of Piperine. One drop is fully equal to six grains of the latter. It is a valuable adjunct to Quinine. One or two drops, added to six grains, will greatly increase the efficacy of that medicine.

For sale by NATHAN JARVIS, 188 Washington Street, where Physicians will find medicines at as reasonable terms as at any place in Boston.

Aug. 25.

copif.

MEMOIR OF DR. HOLYOKE.

JUST published, and for sale by CARTER & HENDEE,—A Memoir of EDWARD A. HOLYOKE, M.D. LL.D., prepared in compliance with a vote of the Essex South District Medical Society.

Carter & Hendee have just received the American Journal of the Medical Sciences, No 8, August, 1829.—C. & H. receive subscriptions for this valuable work, and can supply the numbers from its commencement. Aug. 18.

BERKSHIRE MEDICAL INSTITUTION.

THE Annual Course of LECTURES will commence on the first Thursday in September, and continue fifteen weeks.

Theory and Practice of Physic by H. H. CHILDS, M.D.

Anatomy and Physiology, J. D. WELLS, M.D.

Medical Jurisprudence, S. W. WILLIAMS, M.D.

Theoretical and Operative Surgery, S. WHITE, M.D. and S. F. WHITE, M.D.

Materia Medica, Pharmacy and Obstetrics, C. B. COVENTRY, M.D.

Chemistry, Botany, Mineralogy and Natural Philosophy, C. DEWEY, M.D.

Matriculation ticket, \$ 3. Fee for Lectures, \$ 40. Library ticket, \$ 1. Graduation, \$ 15.50. Board, including washing, lodging and room, \$ 1.75 a week.

Pittsfield, July 22, 1829. aug4sept30

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

THE BOSTON

MEDICAL AND SURGICAL JOURNAL.

Vol. II.]

TUESDAY, SEPTEMBER 1, 1829.

[No. 29.]

I.

MEDICAL PRACTICE IN CONSTANTINOPLE.

Described in a Letter to Dr. Gregory, by R. R. Madden, Esq., a Professional Traveller in Turkey.

Constantinople, Oct. 25, 1824.

DEAR SIR,—The practice of physic in this country is of so extraordinary a nature, that I presume you will take some interest in the history of its absurdity.

There are about fifty medical practitioners in Constantinople, principally Franks, from Italy and Malta, and a few Ionian Greeks, Armenians, and Copts; of this number there are, perhaps, five regularly educated physicians, and two of these are English gentlemen, highly respected both by the Turks and Franks. Every *medico* has his allotted quarter; he beats this ground daily in pursuit of patients, and visits all the coffee-houses in the district with a Greek *drogueman*, as interpreter, at his heels, whose occupation is to scent out sickness, and to extol the doctor. They are ever to be found on the most public bench of the coffee-shop, smoking with profound gravity, and prying into the features of those around them for a symptom of disease. I confess I had to descend to this degradation to get practice, in order to become acquainted with the domestic customs

of the people. The first day my *drogueman*, who had just left the service of a Roman doctor, and had been practising on his own account since his discharge (for all *droguemen* become doctors), took upon him to teach me my professional duty, which he made to consist in never giving advice before I got my fee,—in never asking questions of the sick,—and in never giving intelligible answers to the friends; I was to look for symptoms only in the pulse; I was to limit my *prognosis* to three words, *In Shallah*, or “Please the Lord,” for doubtful cases; and *Allackharim!* or “God is great!” for desperate ones. I took my post in the coffee-shop, had my pipe and coffee, while my *drogueman* entered into conversation with the Turks about us. I soon heard him narrating a history of a miraculous cure, which he had seen me perform some days before, on the body of a dying Effendi; how I had taken out his liver, and put it in again, after scraping off the disease, and how the patient got well the next day, and gave me five purses. I was exceedingly annoyed; but the fellow seemed to mind my anger little, and even reproved “my want of prudence” with a frown.

Now, the only thing that could have given origin to “the scraping of the man’s liver,” &c., was my having opened a boil in his own back the day before. The Turks

swallowed this story ; had it been more marvellous, it would have been still easier digested: one turned up his eyes, and said, "there was but one God ;" another praised my skill, and cried, "Mahomet is the friend of God !" The latter gentleman held out his wrist to have his pulse felt, and said, in a very civil tone of voice, *Guehl, giaour*,—"Come, you dog." This endearing epithet Turks consider ought not to give an infidel offence, because it is more a man's misfortune than his fault to be born "a Christian," and consequently "a dog."

My Greek, whose familiarity was very offensive, (and it is a national fault,) now whispered in my ear, "No bite, that fellow never pays." I gave the man, however, my advice, and got a cup of coffee in return.

A well-dressed man, who had been sitting by my side in silence for half an hour, at last recollected he had a wife or two unwell, and very gravely asked me "what I would cure a sick woman for?"—It was a question to delight the soul of Abernethy. I inquired her malady,—“she was sick.” In what manner she was affected,—“why, she could not eat.” On these premises I was to undertake to cure a patient, who, for aught I knew, might be at that moment in *articulo mortis*. I could not bring myself to drive the bargain ; so I left my enraged drogueman to go through that pleasing process. I heard him ask a hundred piastres, and heard him swear by his father's head and his mother's soul, that I never took less : however, after nearly an hour's haggling, I saw fifty put into his hand ; and the promise of a hundred more, when the patient got well, I saw treated

with the contempt which, in point of fact, it deserved. No man makes larger promises than a Turk in sickness, and no man is so regardless of them in convalescence. I visited my patient, whom I afterwards found both old and ugly ; but I was doomed, on the first occasion, to see no part of her form ; she insisted on my ascertaining her disease with a door between us, she being in one room and I in another: the door was ajar, and her head, enveloped in a sheet, as it was occasionally projected to answer me, was the only part of her I had a glimpse of. This was the only woman I ever attended here, or in the islands, who would not suffer the profanation of my fingers on her wrist. I, however, could just collect enough from the attendants, to cause me to suspect she had a cancer ; and I did all, under such circumstances, that I could well do,—I gave her an opiate. This lady was no sooner prescribed for, than my attention was directed to the youngest wife, who was pleased to need advice, though her sparkling eyes and smiling lips denoted little of disease. She was extremely pretty, and removed her veil with little difficulty ; but she would have her pulse felt through a piece of gauze, which was sufficiently thin to transmit, not only the pulsations of the artery, but also the pressure of the fingers, which mode of communicating symptoms I found a very common one in practice. I ordered her some medicine, which I am quite sure she did not take, and which, in all probability, she did not require. After smoking a pipe, and drinking sherbet, I took my leave.

In a few days after this, my first visit in Constantinople, I was sent for to the house of a grandee, where

a consultation was to be held on a Pacha's case, and one of great importance. I found the patient lying in the middle of a large room, on a mattress spread on the carpet; for the "four-posted beds" of Don Juan and Dudu have no existence in Turkey, and both gentlemen and ladies repose on their mattresses, thrown on the carpet of the divan, in their daily habiliments, none of which they doff at night.

A host of doctors, Jews, Greeks, Italians, and even Moslems, thronged round the sick man; and amongst them were jumbled the friends, slaves, and followers of the patient: the latter gave their opinion as well as the doctors, and, in short, took an active share in the consultation. But he who took upon himself to broach the case to the faculty, was a Turkish priest, who administered to the diseases both of soul and body. He prefaced his discourse with the usual origin of all things: he said,—“In the beginning God made the world, and gave the light of *Islam* to all the nations of the earth. Mahomet (to whose name be eternal honor) was ordained to receive the perspicuous volume of the Koran from the hands of the angel Gabriel; which book was written, by the finger of God, before the foundation of the world; and in its glorious page was to be found all the wisdom of every science, whether of theology or physic; *therefore*, all learning, except that of the Koran, was vain and impious; therefore he had consulted it in the present case, and the repetition of the word honey, he discovered tallied with the number of days his highness suffered (to whom God give health); *therefore* honey was a sovereign remedy, and one of its component parts was wax, a true specific for the disease before them.

Did not the bee suck the juice of every herb? was there not wax in honey? did not wax contain oil? *therefore*, why not try the oil of wax? Oh! illustrious doctors!” he continued, “let us put our trust in God, and administer the dose: our patient has been thirty-six days sick; *therefore*, let him have six-and-thirty drops every six-and-thirty hours. And as there is but one God, and Mahomet is, *therefore*, his prophet, let the oil of wax be given!”

The moment this rigmarole ended, all the servants, and even many of the doctors, applauded the discourse.

There was no time allowed for discussion; the same archpriest took care to see the doctors feed forthwith; each of us got four Spanish dollars, and left the unfortunate sick man to his fate: but going out, when I expressed my astonishment to one of the faculty (an old Armenian) about the exhibition of this new remedy, he looked around him cautiously, and whispered in my ear the word “poison!” On further inquiry, I found the bulk of the patient's property was invested in a mosque. In spite of the remonstrance of my drogman, I returned to the door I had just quitted, and gave an attendant to understand, his master would die if he took the medicine. The poor man died, however: I heard of the event about a month afterwards.

I was shortly after called to a man who was said to have a fever: when I visited him, I asked what was the matter with him, and where he felt pain? but his friend made the customary reply, “That is what we want to know from you: feel his pulse, and tell us!” I accordingly did so,—found it rapid,

his breathing laborious, and his skin hot ; but not one of the symptoms could I get from the patient or attendants. The Turks have the ridiculous idea, that a doctor ought to know every disease by applying the fingers to the wrist. I thought from what I observed, I was warranted in taking blood in this case. I did so ; but no sooner had I bound up the arm, than I was requested, for the first time, to examine the other hand, which I did, and, to my utter astonishment, found two of the fingers carried away, the bones protruding ; and then only was I informed, that the patient was in the army, and had lost his fingers a week before by the explosion of a gun.

I suspected at once the occurrence of locked-jaw ; I felt his neck ; it was like a bar of iron : the man had been laboring under tetanus for three days, and died the following morning. You may well conceive my indignation at such incredible stupidity as the attendants exhibited here, and my choler at being told the result "had been written in the great book of life," and could not be avoided or deferred. Be that as it may, I certainly would not have bled him, had I any reason to suspect the affection of which he died. You may imagine how difficult it is for a medical man to treat such people ; and, consequently, how rarely they are benefited by him. There are few Mahometans who do not put faith in amulets ; I have found them on broken bones, on aching heads, and sometimes over love-sick hearts. The latter are worn by young ladies, and consist of a leaf or two of the hyacinthus, which the Turks call "mus-charumi ;"

this is sent by the lover, and is intended to suggest the most obvious rhyme, which is "ydskerumi," and implies the attainment of their soft desires.

Sometimes these amulets are composed of unmeaning words, like the *abracadabra* of the ancient Greeks for curing fevers, and the *abracalans* of the Jews for other disorders. At other times they consist simply of a scroll, with the words *Bismillah*,—"In the name of the most merciful God," with some cabalistical signs of the Turkish astrologer Geffer ; but most commonly they contain a verse of the Koran.

I think the most esteemed in dangerous diseases, are shreds of the clothing of the pilgrim camel, which conveys the Sultan's annual present to the sacred city : these are often more sought after than the physician, and frequently do more good than the physician, because greater faith is put in them.

The most common of all these charms is the amber bead, with a triangular scroll, worn over the forehead, which the *Marabouts* and the Arab sheiks manufacture, and is probably an imitation of the phylacteries which the Jews were commanded "to bind them, for a sign, upon their hands, and to be as frontlets between their eyes." It would be well if no more preposterous and disgusting remedies were employed ; but I have taken off from a gun-shot wound a roasted mouse, which, I was gravely informed, was intended to extract the ball.

A less offensive and a more common application to wounds, is a roasted fig. I believe old women prescribe it for gumboils in England, and the practice is as

old as Isaiah, who ordered "a mass of figs" to Hezekiah's boil.

Of all Turkish remedies, the vapor bath is the first and most efficacious in rheumatic and cuticular diseases. I have seen them removed in one-fourth part of the time in which they are commonly cured with us. In such cases I cannot sufficiently extol the advantages of the Turkish bath: the friction employed is half the cure, and the articulations of every bone in the body are so twisted and kneaded, that the most rigid joints are rendered pliant.

I have trembled to see them dislocate the wrist and shoulder joints, and reduce them in a moment: their dexterity is astonishing, and Mohammed's shampooing, at Brighton, is mere child's play in comparison. Query,—would not gout be benefited by this remedy, provided it could be really introduced into England as it is used in Turkey?

As a luxury, I cannot better describe it than in the words of Sir John Sinclair:—"If life be nothing but a brief succession of our ideas, the rapidity with which they now pass over the mind would induce one to believe, that, in the few short minutes he has spent in the bath, he has lived a number of years."

I cannot conclude without telling you how all Frank medical men are teased by the Turks for *aphrodisiacs*, which they denominate *madjoun*: I am solicited for it at every corner; and it is lamentable to observe, that hardly a man arrives at the age of five-and-thirty, whom debauchery has not rendered debilitated, and dependent on adventitious excitement for his pleasures. The la-

dies, on the other hand, are desirous of gaining honor by a progeny like Priam's, but they have few children in general, for polygamy is, probably, injurious to population. They cease not, however, to annoy me for medicines to make them fruitful; and are as solicitous for specifics as Rachel was to obtain from her sister some of the prolific man-drakes.

I had always occasion to observe that the sick man was all civility and courtesy when his life was in jeopardy, but the moment he became convalescent he treated me with arrogance, as if he had been ashamed of letting an infidel see that a Moslem was subject to the infirmities of humanity. My services were forgotten whenever they ceased to be required. All the other medical men complained of the same ingratitude; indeed, no physician opened his mouth till the patient opened his purse. The Greeks certainly behave better in this respect; but yet there is that strange obliquity of principle in them, that I never doubted, while a Greek fed me generously with one hand, that he would not have picked my pocket with the other at the same moment. Such is the low state of medical science in this country; and such probably it was in Europe so late as the tenth century. It has been well remarked, that the state of medicine may be considered as the criterion or barometer of the science in a nation. Wherever science and refinement have extended their influence, there medicine will be most cherished, as conducive to the interests and happiness of mankind.

(To be continued.)

II.

OBSTINATE CONSTIPATION.

*Case illustrating the Necessity of Actual Examination and Mechanical Remedies.**

By WILLIAM COX, M.D.

A. B., a female, about 60, a few weeks ago, became a patient of mine. Her general health was good, and she took her meals with appetite. She was a woman of very sedentary habits, seldom or never moving from the house, or using any kind of exercise. She stated that for a long time she had been subject to habitual costiveness; and that she was constantly obliged to have recourse to opening medicine of some kind, without which the bowels would become permanently confined. Her first application to me was when she stood much in need of such medicine. I found much difficulty in procuring evacuations, which were effected only by strong cathartics in repeated doses. I therefore directed her nurse to try the effect of a daily use of warm water as an enema; and to throw up a bulky injection immediately after the stomach was distended by her breakfast. I also advised my patient, about a quarter of an hour after that meal, to make an effort to relieve herself; and by such means endeavor to bring the bowels into a habit of emptying themselves. Nothing but gruel was allowed her for supper. After the first attempt to throw up an enema of warm water, the nurse informed me that my patient had "*piles*;" and also that "*her body was much down*." Of course, from this de-

scription, I concluded that there was prolapsus ani. On examining my patient, in order to ascertain her real condition, I found a few hæmorrhoides externally; but I quickly perceived that what the nurse had in the first instance mistaken for a protrusion of the gut, was in fact an actual protrusion of scybala; so hard, firm, and compact, that although, by the repeated efforts and straining of the patient, the anus was so stretched as to be very open and large, yet she could not relieve herself. I therefore had immediate recourse to mechanical means; first making use of the handle of a table-spoon, as a sort of scoop, and afterwards of my finger; and, to my surprise, I found the rectum stretched and expanded into a capacious bag or pouch, and filled with scybala; an amazing quantity of which I removed, some part of them being so dry as to crumble into powder when crushed. Having perfectly cleared the gut, as far as the finger could possibly reach, it became a question whether or not there were other accumulations of a similar kind higher up. That there were, I could scarcely doubt, and I considered it indispensably necessary that there should be a perfect clearing out of the retained materials. For this purpose various means were adopted. The patient was put into a warm bath, to promote relaxation; purgatives of various kinds were given, in order that, by their respective specific action, every part of the alimentary canal might be stimulated. Calomel, jalap, cathartic extract, the black draught, ol. ricini, &c., were administered in succession for some days. The whole sur-

* From the London Medical Gazette.

face of the abdomen was subjected to friction with an oiled hand, in a circular direction, from right to left above, from left to right below, from below upwards on the right side, and from above downwards on the left. Clysters of warm water, in the quantity of a pint and a half, were thrown up; and the patient was confined strictly to a water-gruel diet, into which a portion of *ol. olivar.* was daily put without her knowledge. This plan was followed day after day for some time, and with the best effects; for during many days a considerable quantity of fecal matter was brought away, of the most offensive nature; and the abdomen, which before was full, firm, tense, and unyielding, now became reduced, relaxed, and soft. The motions gradually assumed a natural appearance; the aperient medicines by degrees were laid aside; and at last, when there appeared to be no further occasion for their use, left off altogether. A free passage throughout the whole alimentary canal appeared to be re-established, and a healthy action of the different organs brought about. In this state the patient removed to another part of the country, and I have not heard from her since. She had never been subject to hernia; neither was there any disease of the pelvic viscera, nor any thickening or enlargement of the uterus or the bladder, so as to press against the rectum. After she became my patient, I learned that the medical gentleman who previously attended her, had for a long time given her drastic cathartics, sometimes, I believe, *elaterium*; but all the evacuations that were procured must have passed down, in

a more or less liquid state, between the sides of the rectum and the hard accumulated feces it contained. On no occasion, while under my care, was she troubled with sickness or vomiting; nevertheless, I satisfied myself, by examination, that there was no hernia; and, by examination per vaginam, that there was no diseased enlargement of the uterus, &c.

The history of this case I think satisfactorily proves that, in many instances of long-continued and obstinate constipation, a personal examination of the patient is absolutely necessary. Had not this female been mechanically relieved, her life must ultimately have been sacrificed; and doubtless many a life has been lost for want of such examination.

P. S.—There was a remarkable dirty yellowness of skin, or rather, dirty *sallowness*, in this patient; which I attributed to the long retention of fecal matter in the alimentary canal, for the skin became improved in clearness after she was relieved.

III.

MELÆNA.

The following interesting case is related in an English Journal, by H. S. Balcombe, M.D., and has doubtless many parallels among us, which are but imperfectly understood.

JUNE 1st, 1828.—Mr. H. this day requested my advice. He states himself to be in his 57th year; to have long labored under dyspepsia, for which a few simple remedies have from time to time been taken, but that he has never undergone any regular course of

medicine, nor remitted his accustomed duties. For many years he has devoted the greater part of the day to business, and his spare time has been chiefly devoted to literary pursuits. The death of a very intimate friend, a short time ago, gave him a severe shock, and first made him think a little more seriously of his state of health. He complains of fulness of the stomach; an unpleasant sense of fluttering about the chest; vitiated taste; fulness and viscidness of the fauces; constant nausea; and torpid bowels. The tongue is very pale, and streaked with yellow; pulse 80, and languid; evacuations pitchy black; urine pale; countenance anxious, and of a dirty yellow color; abdomen distended, and soft; and pressure creating no pain in any part. An emetic brought away an immense quantity of sordes and undigested food. He was so much relieved by it, that another was given on the succeeding day with the same effect, but followed by considerable hæmatemesis, the blood being exceedingly dark. The bowels were well emptied; the evacuations as before, pitchy black. He now complained of occasional vertigo, general restlessness, anxiety, and frequent faintings: he had one fit during my visit, which alarmed us all much: he soon recovered, and after taking a little food, de-

clared himself much relieved, and feeling very comfortable.

In consultation with Dr. Goldie, it was determined to give small doses of blue pill and opium morning and evening; the nitric acid in infus. ros. ter die, and to try to support him by a moderately generous diet. Under this plan, from the 3d up to the 8th, he appeared to improve so much that all his family had sanguine hopes of his recovery, and our longer attendance was thought unnecessary; though both Dr. G. and myself, well aware of the deceitful nature of the disease, and of the danger that lurked under all this semblance of returning health, felt justified in giving a very cautious prognosis, and in endeavoring to moderate the feelings of the family. On the 13th, I was again summoned to him hastily, in consequence of a return of all his symptoms, supposed to have been brought on by over-exertion, and a little excess in food. I found him very ill: tongue brown and dry; pulse quick, feeble, and fluttering; syncope upon the least exertion; much blood, dark and grumous, passing down. Some stimulants were exhibited with temporary benefit; but at 9, P. M., we were again urgently sent for, and arrived just as he had expired.

Inspection of the body was declined.

SKETCHES OF PERIODICAL LITERATURE.

ANTI-SPECIFIC NATURE OF VENEREAL VIRUS.

Among the *Antis* of the day, it would be somewhat remarkable if subjects connected with the medical profession should not be introduced.

The last number of the London Medical and Physical Journal contains some remarks on the nature and treatment of bubo; the author of which is evidently of the class of modern sceptics in regard to the spe-

tific character of venereal virus. He considers the general cause of bubo to be irritation in the course of the lymphatics leading to the inguinal glands. Of course, it may be occasioned by a local cause applied to the foot or leg, as well as by syphilitic virus: the nature of the inflammation depends on its common seat, not on its various causes; consequently, the rules for treatment are common to all cases, without discrimination between syphilitic and others. In regard to the general treatment, bleeding, purging, and antimonials, are recommended, if much excitement is present, but otherwise are to be abstained from. Warm applications are to be preferred to cold, even while the object is the discussion of the tumor. The chance of effecting this is considered equally great as when the opposite means are employed, and the danger is avoided of leaving that hard, indolent swelling, which so often remains when discussion has been produced by cold applications. In this opinion we fully coincide; and it is by no means clear to us, that the same principle of treatment ought not to be extended to other phlegmonous tumors, as well as those of the glandular character.

In the secondary, or suppurating stage, the same local treatment is to be continued, and the abscess generally allowed to burst of itself. When an artificial evacuation is necessary, the author advises caustic in preference to the lancet,—a preference we suspect not very common at the present day. In this way, however, it is expected to ensure the entire de-

struction of the bubo, within a short time of casting off the slough.

In the ulcerative stage, tonic treatment is sometimes required, and occasionally some caustic substance, or the mercurial ointment, is needed as a local stimulus. Mercury, in every other form, is held to be inadmissible or useless throughout the progress of the disease, whatever be its character or origin. The distinction of buboes into scrofulous and venereal, is regarded as wholly useless; as no benefit is thought likely to arise from treating venereal buboes upon any other principle than that of meeting general indications, without reference to the remote cause.

The views above stated are certainly entitled to attention, and seem, on the whole, to be gaining ground in the medical community. We confess ourselves, however, disposed to receive these anti-specific doctrines with considerable distrust. Before the introduction of mercury in the treatment of syphilis, it had in its various forms been treated on general principles, and we know that its ravages were dreadful. Since that period, also, attempts have been frequently made, and as frequently abandoned, to dispense with its use. Sarsaparilla, mezereon, &c., have had their day, and are not likely to be revived; while the anti-syphilitic powers of mercury have maintained their reputation through all these vicissitudes, and have now acquired an importance in the opinions and the practice of the profession, which it will require much time, and many facts in addition to those we now possess, materially to impair.

ALOES.

A WRITER in the Medical Gazette, denies that the apprehensions entertained of this drug, as tending to produce or aggravate hæmorrhoidal affections, are well founded. Hæmorrhoids, indeed, are not necessarily connected with the use of any cathartic. They occur in loose as well as in costive habits; but in the last case, which is a frequent one, as aloes is frequently found a convenient article for procuring stools, and is often resorted to for that purpose, it has hence unjustly acquired the reputation of an agent in producing them. The mode in which it is supposed to do this, is by stimulating the lower part of the rectum; but, notwithstanding this general impression, there exists no proof that the article produces its principal effect on this portion of the passage. It is much more probable, that its chief action is exerted on the colon, and that the rectum acts in consequence of the stimulus of distention after the fæces are conveyed there. The author argues further that, considering the very general use of the article as a popular remedy in constipation, and that it enters into the composition of most of the pills used for this purpose, its effects ought to be visible in the very general production of piles, in a greater or less degree, in those addicted to the use of cathartics, which does not appear to be the fact.

As far as our own experience on this subject extends, we should be disposed to agree with our author in regarding aloes, particularly when combined with rhubarb, as a safe,

easy, and effectual cathartic, extremely well adapted for cases of habitual constipation in which it is found necessary to have recourse to articles of this description. With regard to the production of hæmorrhoids, there does not, we have said, seem much ground for attaching much agency to aloetic cathartics; hence we should doubt, also, the correctness of the very general prejudice which exists against its use in this disease.—Another prevalent notion is, that aloes is contraindicated in pregnancy, as its stimulating property extends to the organ mainly concerned in that process. That violent catharsis has a tendency to interrupt the progress of gestation, is abundantly proved; but that this is especially the case when aloes is employed, has not, by any means, been demonstrated. The argument drawn from its effect in amenorrhœa, is imperfect for several reasons. In the first place, the effect of aloes as an emmenagogue is confessedly very uncertain; and when it does succeed, its *modus operandi* is mere matter of conjecture. In the second place, the state of the organ is so materially altered by the circumstance alluded to, that it is impossible to reason from its actual effect in one state, to its probable influence in the other. From the effect of *secale cornutum* in labor, great advantages were at one time expected from its employment in amenorrhœa, and great danger from its administration during the period of gestation. Neither of these anticipations has been verified, and with respect to the former, it has been shown to be the reverse of the fact;

since the article alluded to has been employed in menorrhagia with the most decided success. On the whole, we are justified in suspecting that the fear of employing aloes in pregnancy is the effect of prejudice, rather

than the result of experience; and that, administered in moderate quantities, it is not likely to be attended with more danger in such cases, than other purgatives in common use.

BOSTON, TUESDAY, SEPTEMBER 1, 1829.

THE SIAMESE BROTHERS.

OUR readers have been apprized, through the newspapers, of the arrival in this city, and public exhibition, of the united boys from Siam. On first viewing them, the attention is arrested by their healthy and happy appearance. They are nearly of the ordinary stature, have heads uncommonly large, and foreheads higher, but less broad, than those of young men generally at their age. Their complexion, features, and countenance, are altogether Chinese, and accord with tolerable exactness. After seeing them often, however, the peculiarities of each become more evident, and they appear scarcely, if any, more resemblant than other twins have appeared when clad in like apparel.

By the plate below, which is that already before the public, they would appear to be united by a cartilaginous substance of an hourglass shape, passing from the epigastric region of one, and attached to that of the other. This, however, is not the case. The skin is continuous from one boy to the other; and with the exception of a scar in the lower surface, evidently occasioned by the removal of the cord through which they were nourished in the foetal state, it presents

no mark, blemish, or discoloration whatever. This scar bears but little resemblance to that usually left by the division of the umbilicus; a fact which may be explained in two ways. It may be owing to some manner of performing this operation among the Siamese, different from that in use among us; or the constant pulling on this connecting mass, may have drawn it out, and occasioned the long and even surface which it presents.



On closer examination, the true nature of the union becomes evident. The ensiform cartilages of the sternum are bent outwards, and united by ligaments at their extremities, forming a kind of joint which admits of motion in various directions. By the pulling of these ligaments, occasioned by almost every movement, the

integuments below have been drawn out, as it were, so that the whole forms a band of union, horizontally about two inches broad, and in thickness, vertically, about four inches. Its length is about half that represented in the plate, and was doubtless originally very small. The whole mass is tough, and capable of being extended very considerably. When loose, that is, when the boys face each other and stand close together, if one hand be placed above this curvature and the other below it, and the latter be then pressed forcibly up, the hands approach each other so nearly, as to convey the impression (doubtless a correct one) that the intervening substance is little more than the ensiform cartilages united by ligaments, and surrounded by the integuments. The concave inner, but in this case *under*, surface of these cartilages, is distinctly felt, but no pulsation whatever is distinguishable.

Although we cannot say that the skin which envelopes this projection was originally endowed with less sensibility than that which covers other parts of the body, yet it is evident that such deficiency exists at present. We were obliged to press it forcibly between the fingers before any mark of pain was elicited, and we were informed by the attendant that he had often pinched it during their slumbers without disturbing them.

The precise effect of this physical union, on the intellectual faculties, the moral sentiments, and animal propensities of these boys,—its influence on the functions of the different

organs, and how far it would communicate or modify the effects of morbid or medicinal agents, are subjects on which we shall not enter. No opportunity has yet presented of observing the influence which disease or medicine in one, would exert on the other; but circumstances do not appear to justify the least suspicion of any mental individuality. Whispering in the ear of one, conveyed no sense of sound to the other. Volatile salts applied to the nostrils of one, produced in the other only a curiosity to try the same experiment on himself. Pinching the arm of one, was attended by no sensation in the other. Being desirous of ascertaining if there was *any* point where both felt, we made an impression with the point of a pin in the exact vertical centre of their connecting link; both said it hurt them. We then made other impressions, extending them very gradually further from this point: the result was, that within the distance of three-fourths of an inch from the centre toward each boy, sensation was communicated to both by a single prick; beyond this it was excited in one only, the other perceiving it in no degree whatever. This experiment was remarkably satisfactory, and we apprehend that farther than here exhibited, the two youths must be considered, whilst in a state of health, as free and independent agents, and the functions of all the other organs as unconnected as those of their brains.

Twins frequently resemble each other in intellect and disposition, as well as in person, and this is particularly the case with the boys in ques-

tion. When to this natural resemblance we add the habit they have contracted of acting simultaneously and in concert, we shall be less surprised than we might at first be, at the facility with which their various movements are performed, and the quickness with which one responds to the inclinations of the other.

In the course of their voyage, they would not only run, we are told, and leap with great agility and without interfering with each other, but climb to the mast-head as fast as any sailor on board the ship. They are seldom observed to converse with each other, and the concert with which they act seems to be almost instinctive. In playing the game of drafts, e. g., which they learnt with great ease, being of a people naturally fond of games and gambling, they were observed to decide on their moves almost instantaneously, and to make them with a quickness and air of decision sufficiently characteristic of all their movements. In the course of the game, sometimes one and sometimes the other would make the move; they appeared to have the same plans, and always acquiesced in the moves of each other. Yet they sometimes *play against each other*; but so strong is their habit of co-acting, that such games go on with less freedom than when opposing a third person.—Their alvine evacuations generally occur at the same time; their appetites and tastes are all very much alike; and they appear not only contented but happy, and extremely attached to each other.—Capt. Coffin was informed by their mother that she had borne seven-

teen children. Once she had three at a birth, and never less than two; though none of her other children were in any way deformed.

The question naturally arises in the mind of every observer, could not this connecting substance be divided without injury to the boys? We do not pretend to solve this problem, which after all can only be fully decided by the experiment; but we hesitate not to say that, after several very accurate examinations, our impressions are that such division would be a detriment only to the very respectable and obliging gentleman who offers them for exhibition. The anatomical structure of this bond of union is apparently simple, and we regard the fact that children so united should have been ushered into the world with safety to themselves and their mother, that they should have escaped the ills and early fatality which usually attend such prodigies, that they should have grown up to the age of 18 years in the uniform exercise of mutual good will and a spirit of mutual accommodation, and that they should be so perfectly contented with their lot, and so happy in all the various unpleasant circumstances in which they are placed, as far more remarkable than that such a deformity should have existed. Instances of foetuses united much more closely than are these boys, are by no means rare in the books or cabinets of anatomists. The mode of union is very various, being sometimes at the hips, backs, or sides; several cases are related by Parée and Tulpus, in which the connection was at the abdomen. In the Philo-

sophical Transactions is an account of two children thus united, born near Manchester, Eng. in 1752.—In 1748, Dr. Parsons communicated to the Royal Society an account of a still-birth not very unlike that of the boys now exhibited. The foetuses were united from the umbilicus to the upper part of the sternum, and the single cord by which they were nourished, entered the connecting medium at a central point on its lower surface.—Dr. Cotton Mather communicated to a learned friend in England a similar case, of which he was eye-witness, and which occurred in this city in 1713; and a double foetus, born in this country at a much later period, is now preserved, and deposited, if we mistake not, in the anatomical cabinet of a neighboring medical institution.

Most monsters have been stillborn, and of the few who have been living, a very small proportion have survived many days. The most remarkable, and, as far as our memory goes, the only case on record of such monsters acquiring the adult age, occurred in Hungary more than a century ago. Two females, Judith and Helen, born in Szona in 1701, were united at the lower part of the back. They had between them but one urethra, and one passage for the faecal evacuations. Their bodies, abating the deformed part alluded to, were well shaped, and their faces beautiful. They were intelligent, and, like the boys of Siam, not only contented, but, in the language of their father, "both brisk and merry." Like them, also, these girls "had not their feeling common any where but in

the place of their conjunction." When one stooped she lifted the other on her back, and when one went forward the other was drawn backward. One would sometimes sleep whilst the other was awake, and though tenderly attached, their inclinations were not always the same. These Hungarian sisters were well educated and well bred; they could speak four different languages, and sing very prettily. They lived to the age of twenty-two years, during which time they were exhibited in different parts of Europe, and both died together in 1723.

CHIRAYITA HERB.

THE virtues of this remedy, with a case of leucorrhœa cured by it by Dr. Blundell, will be found referred to in page 174 of this volume of the Journal. As a tonic and stomachic remedy, it appears to be gaining favor with the profession abroad, and we are happy to apprise our readers that it has found its way across the Atlantic, and is now for sale by Ebenezer Wight, Apothecary, in Milk Street. The last number of the London Gazette of Health contains the history of a clergyman at Clifton, who after having suffered severely and many years from dyspepsia, accompanied by distressing nervous headach and a high degree of excitability of the nervous system, was entirely cured by the chirayita.

TANNIN IN MENORRHAGIA.

THE *Révue Médicale*, of the month of September last, contained some observations of Pata on the good effects of tannin in the above disease. When

these observations met the eye of Cavalier, he was attending a young woman, 33 years of age, affected with hemorrhage from the uterus, for the cure of which he had employed various means in vain. It must be observed, that this female had been subject, for many years, to a bleeding from the anus, which increased, but without deranging the course of the menstrual discharge. But after a violent affection of the mind, this bleeding became much worse, and a uterine hemorrhage also took place. At length M. Cavalier prescribed the tannin, in doses of two grains every two hours. On the first day, some amendment was perceptible; on the second, the flux of blood from the anus ceased; and on the third, the menorrhagia was stopped, giving place to an abundant leucorrhœa, but this also diminished under the continued use of the same remedy, and the patient became convalescent. The same author also relates the case of a young girl of 17, who was affected with uterine hemorrhage in consequence of using violent exercise during the period of menstruation. She had employed all the common remedies, including extract of rhubarb and opium. Everything having been useless, he prescribed the tannin, and with success equally prompt as in the first instance; for, at the end of four days, the discharge had entirely ceased.

Case of Tetanus cured by Bleeding.—A man, of about 30 years of age, after working very hard, experienced severe pains in the vertebral column: he was attacked by locked-jaw, to which, in a few days, succeeded tetanus and emprosthotonos. In the course of nineteen days, he was bled eight times from the arm: the four first bleedings were performed in the first two days, from three to four pallets each. In the same time, six hundred and eighty leeches were applied along the spine, two or three warm baths were administered, and

every morning and evening a simple clyster, with an addition of 25 drops of laudanum, which were gradually increased to 105 drops. The patient was cured.—It is to be remarked, that notwithstanding the great loss of blood, the pulse continued both very full and very frequent. The man was so little weakened, that on the fourth day of his convalescence he was in a condition to walk.

Intermittent Tetanus.—A woman, 67 years of age, was affected with whitlow on the thumb of the right hand: the first phalanx being detached, the wound healed: a fortnight afterwards a pricking pain was felt in the lower part of the cicatrix, which extended little by little to the whole arm, following the course of the median nerve: this pain lasted from five minutes to a quarter of an hour, and returned once every day. After the lapse of a few months, trismus and opisthotonos were added to the other symptoms. The thumb was amputated, and the disease did not reappear. On examining the amputated part, it was observed that the cicatrix was cartilaginous, and that a nervous twig that was imbedded in it, was of a deep red color for the extent of a line and a half.—*Heidelberger Clineche Annalen.*

Poisoned Sugar-Plums.—The French chemists have, at different times, pointed out the danger of eating colored "bonbons." In a recent number of the *Clinique*, it is stated that many accidents have very lately occurred in Paris from this cause. We have never known such accident in this country, though children eat them very freely.

REPORT OF DEATHS IN BOSTON,

The week ending August 23, at noon.

Of bilious fever, 1—consumption, 1—cholera morbus, 1—child-bed, 1—dysentery, 2—enlargement of the heart, 1—infantile, 4—liver complaint, 1—measles, 4—old-age, 1—spasms, 2—teething, 1. Males, 7—females, 13. Total, 20.

ADVERTISEMENTS.

EUROPEAN LEECHES.

RICHARD A. NEWELL, Druggist, respectfully acquaints the physicians and families of the city, that he has made arrangements with one of the first mercantile houses on the continent, to be regularly supplied with the Genuine Medicinal Leech. He has now on hand a fresh supply, just received, which are for sale.

N. B. The difficulty of obtaining genuine Leeches by the usual way has induced him to make the above arrangement at considerable expense, and he hopes it will meet the approbation of the medical faculty. Summer-street, opposite Purchase-street.

Sept. 1.

St.

HARVARD UNIVERSITY.

MEDICAL LECTURES.

THE MEDICAL LECTURES in Harvard University will begin in the Massachusetts Medical College, Mason-street, Boston, the third WEDNESDAY in October next, the 21st, at nine o'clock, A. M.

Anatomy and Surgery, by Dr. WARREN.
Chemistry, Dr. WEBSTER.

Midwifery and Medical Jurisprudence,
Dr. CHANNING.

Materia Medica, Dr. BIGELOW.

Theory and Practice of Physic, Dr. JACKSON.

Students attending the Medical Lectures are admitted, *without fee*, to the Surgical Operations and Clinical Practice of the Massachusetts General Hospital, during the courses.

Aug. 4. W. CHANNING, *Dean*.
eoptOct21.

NEW LONDON WORK.

JUST received, by CARTER & HENDEE, corner of Washington and School streets, A Chemical Catechism; in which the Elements of Chemistry, with the recent discoveries in the Science, are clearly and fully explained. Illustrated by Notes, Engravings and Tables, and containing an Appendix of select Experiments, &c. By THOMAS GRAHAM, M.D. Member of the Royal College of Surgeons in London, &c. &c.

C. & H. have also just received, Elements of Chemistry. By ANDREW FYFE, M.D. F.R.S.E.

EUROPEAN LEECHES.

CHARLES WHITE, No. 269 Washington street, corner of Winter street, has just received a fresh supply of EUROPEAN LEECHES, extra large and in prime order. Also, by the late arrivals, a general assortment of MEDICINE.

*** Strict personal attention paid to Physicians' prescriptions and to the compounding and delivery of Family Medicine, and all favors gratefully received.
Sept. 1.

MEMOIRS OF DR. GOOD.

JUST published and for sale by CARTER & HENDEE, Memoirs of the Life, Writings, and Character, Literary, Professional, and Religious, of the late JOHN MASON GOOD, M.D. F.R.S. F.R.S.L. Mem. Am. Phil. Soc. and F.L.S. of Philadelphia, &c. &c. &c. By OLIVIER GREGORY, LL.D. Aug. 11.

BERKSHIRE MEDICAL INSTITUTION.

THE Annual Course of LECTURES will commence on the first Thursday in September, and continue fifteen weeks.

Theory and Practice of Physic by H. H. CHILDS, M.D.

Anatomy and Physiology, J. D. WELLS, M.D.

Medical Jurisprudence, S. W. WILLIAMS, M.D.

Theoretical and Operative Surgery, S. WHITE, M.D. and S. P. WHITE, M.D.

Materia Medica, Pharmacy and Obstetrics, C. B. COVENTRY, M.D.

Chemistry, Botany, Mineralogy and Natural Philosophy, C. DEWEY, M.D.

Matriculation ticket, \$3. Fee for Lectures, \$40. Library ticket, \$1. Graduation, \$15.50. Board, including washing, lodging and room, \$1.75 a week.

Pittsfield, July 22, 1829. aug4tsep30

MEMOIR OF DR. HOLYOKE.

JUST published, and for sale by CARTER & HENDEE,—A Memoir of EDWARD A. HOLYOKE, M.D. LL.D., prepared in compliance with a vote of the Essex South District Medical Society.

Carter & Hendee have just received the American Journal of the Medical Sciences, No 8, August, 1829.—C. & H. receive subscriptions for this valuable work, and can supply the numbers from its commencement. Aug. 18.

Published weekly, by JOHN CORRON, at 184, Washington St. corner of Franklin St., to whom all communications should be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

THE BOSTON

MEDICAL AND SURGICAL JOURNAL.

VOL. II.]

TUESDAY, SEPTEMBER 8, 1829.

[No. 30.]

I.

CASE OF DISEASED URETHRA, WITH
RETENTION OF URINE.

*Extraordinary Measures adopted
by M. Roux.*

ON the 22d of April, an old man was admitted under the care of M. Roux. The case of this patient, already sufficiently severe, presented a character still more serious and important, in consequence of the extraordinary measures resorted to by the surgeon for its relief. M. Roux, on questioning the man, discovered that he had only once had a gonorrhœa in his youth, but that the water had been passed with difficulty for some time; that he had neglected what he had considered only as an inconvenience, but that, within the few last days, there had been a complete retention. Not only did the urethra appear much contracted, but it was evident that the canal had undergone a rupture (neither the seat nor extent of which could be determined), since there was a urinous abscess developed in the perineum. The first indication, of course, was to pass the catheter, and to draw off the urine contained in the bladder; but after many attempts with various instruments, this was found to be impossible, and, considering M. Roux's dexterity, he had great right to presume that any other person would equally have failed. However, in examining the patient

carefully, the tumor observed in the hypogastric region was thought not to belong entirely to the mere distention of the bladder: it was not globular, smooth, and resisting; on the contrary, it was very irregular; it extended upwards towards the right flank; it was besides soft, and a certain fluctuation was perceptible. In consequence of this, M. Roux, although he had discovered the existence of stricture in the urethra, and consequently of a considerable increase in the size of the bladder, fancied that this tumor was a purulent collection, first originating in the cellular tissue of the perineum, but communicating with that of the pelvis, and extending to the right flank. One other circumstance seemed to strengthen this opinion, which was, that whilst attempts were made to pass the catheter, a bloody pus escaped by the upper end of the instrument, and on pressing the perineum, a still larger quantity escaped. There was nothing to exclude the idea of a communication between the two tumors. M. Roux, agitated by these suppositions, was uncertain as to what line of conduct he should adopt; certainly the most obvious and simplest plan was to penetrate into the bladder by the natural passage, but unluckily he had been unable to accomplish this, notwithstanding all his address. It appeared certain that the extremity of the catheter penetrated into the

perineal abscess; the continual escape of the pus proved this. Obligated to abandon all his efforts in that direction, and leaning to the opinion that the hypogastric tumor was an abundant collection of pus, he decided upon making an opening into the abdomen. He afterwards said, that had he been well convinced that this tumor was merely the bladder in a state of distention, he should have been content with simply puncturing it; but he feared (should that not be the case) to wound the bladder unnecessarily. He therefore wished not to open the bladder, and yet he made an incision two or three inches long, in the parietes of the abdomen, parallel to the linea alba, and immediately above the pubes. He divided the parts layer by layer, so as only to involve the abdominal parietes; but such was the size of the bladder, and its adhesion to those parietes (as he said) that his instrument passed at once into its cavity. Immediately an abundant discharge of fluid ensued, which was recognized as urine tinged with blood; there was, therefore, on this side, only the common result of a complete retention of urine; however, the opening was enlarged, so as to permit a gum elastic catheter of a very large size, to be introduced and left in the bladder. Some trials of rather a singular nature were then made: not only was an instrument again introduced into the urethra in the ordinary manner, but, as the finger of the operator, inserted through the wound he had made, was able to reach the neck of the bladder, it struck him to pass a catheter in this direction also: it was guided by the finger into the neck of the bladder, and having passed a certain space, probably the prostatic

portion, it also was stopped by the stricture. The operator, therefore, held two catheters at the same time; one reaching from the orifice of the penis to the stricture, the other from the wound in the abdomen, through the neck of the bladder, to the same spot; and thus he could appreciate, in some degree, he said, the space contained between the two extremities of the instruments. Such was the first result of this severe and long operation. The patient was then permitted to rest until the next day, the 23d.

On that day, M. Boyer examined the patient, and he thought it necessary, as well as M. Roux, with the double intention of opening the perineal abscess and giving a more favorable issue to the urine, to make a large incision of the integuments parallel to the raphe, below the testicles, and thus to open the urethra. This incision was therefore made by M. Roux, who after having passed a catheter by the wound in the abdomen, thought he felt the point sufficiently to enable him to make it a guide for the rest of the operation; that is, for the incision into the urethra. This was a conductor rather of a novel species: a very large-sized gum elastic catheter was finally pushed, by this new passage, into the bladder; and as that was considered sufficient, the other was withdrawn.

About an hour and a half after the operation, a pretty considerable hemorrhage took place from the wound in the perineum. M. Boyer was still in the amphitheatre, and he discovered that the bleeding proceeded from a small arterial branch of the internal pudic: it was readily seized by the forceps, and secured. From that time the urine chiefly flowed through the

catheter, and very little was observed at the upper orifice; nevertheless, considering the man's age, the loss of blood, and the severity of the operations he had undergone, there was nothing encouraging in his condition. On the 24th, at five o'clock in the evening, the patient died, his state of tranquillity being only disturbed, two hours previous to his death, by delirium.

Necropsy.—The body externally was remarkably thin, and the abdomen greatly tumefied, from which, when opened, a great quantity of fœtid gas escaped. The anterior parietes, divided transversely about the navel, was turned down towards the pubes. The peritoneum presented scarcely any trace of inflammation, with very little serum, or redness, and no false membrane. The anterior parietes of the bladder adhered to the abdomen above its ordinary connexion, and the incision had penetrated at once into that viscus. M. Boyer himself, having sawn through the pubes, removed all the parts, including the rectum: he afterwards prolonged the incision made during life, to the anterior part of the bladder, and a little pus was observed disseminated between the peritoneal and muscular coats; this latter was greatly thickened, so as to be five or six lines thick. In the interior it presented thick fleshy columns, resembling those of the heart; between these columns were large cells, especially towards the bottom of the bladder. All the neighborhood of the wound in the abdomen was filled with coagulated blood. M. Boyer, with the help of a grooved sound, divided the upper part of the urethra from behind forwards,

and the following particulars were observed:—The prostatic portion was sound, the prostate itself only presenting those small connexions found generally in old men; but the bulb of the urethra was the seat of the disease. An irregular opening was situated on the right side, communicating with the abscess of the perineum. The incision made by M. Roux was before the stricture, or rather the closing of the urethra, which extended for about an inch. The rest of the canal was sound. The abscess occupied but a short space, and the cellular membrane in its vicinity was indurated.—*La Clinique, 28 Avril.*

II.

LIGATURE OF THE COMMON CAROTID.

The following case of the successful application of a ligature to the common carotid, for the purpose of arresting hemorrhage from a wound in the artery passing through the parotid gland, has been recently reported in the *Journal Hebdomadaire*. It was performed at a hospital in Lisbon, where the art of surgery is cultivated with boldness and success. In the same hospital, the iliac was recently tied for an aneurism in the groin. The ligature, which was of catgut, was left in the wound. The result of this case, also, was successful, the patient having been discharged on the 85th day.

E. DUARTE, æt. 44, of middle stature and sanguine temperament, addicted to spirits, was admitted into the Hospital St. Joseph at 7 o'clock in the evening, Feb. 27th, 1825, having a wound about fourteen or fifteen lines in

extent, made with a cutting instrument, on the left side of the face on the parotid gland. On introducing the finger, it was ascertained that the wound took the direction of the pharynx. The patient stated that he had received the injury at half past six, and lost a large quantity of blood at the moment from the external opening, and a little from the mouth. The slightest movement of the jaw brought on copious bleeding; the face was pale, the pulse scarcely to be felt, and the limbs cold.

As it would have been difficult to secure the vessel at the site of the wound, it was deemed more expedient to take up the common carotid, and this was immediately done by M. J. Lorenzo de Cruz, in the manner recommended by Mr. Hodgson. He went on without anything very remarkable till the thirty-seventh day, when he was seized with violent hemorrhage from the lower orifice; the blood, from its quantity, color, and the rapidity with which it flowed, had every appearance of being arterial: he fainted, and remained long in that state. Compression was employed, and when he recovered from the syncope he was bled to the extent of five ounces. He was placed on rigorous diet and absolute rest. The bleeding did not return, and on the 66th day he was discharged, the wound having entirely healed.

III.

RESISTANCE TO POISON.

The following remarkable and almost incredible account, was published in a late number of the London Journal of Belles Lettres. The prin-

cipal facts it contains, were substantiated in a subsequent communication to that Journal, from Dr. J. Gordon Smith, who was an eye-witness of the exploits of Mr. Chabert, and who is the author of several able works on the subject of poisons, &c.

ON Tuesday we had an opportunity, at the Argyll Rooms, of witnessing the extraordinary powers possessed by M. Chabert, of resisting the effect of poisons, either internally or externally. M. Chabert is the individual whose equally wonderful capability of withstanding heat has been shown by his remaining shut up in ovens during a long period, and under a degree of temperature far above that which would have destroyed any other living creature. The experiments on the present occasion, were exhibited to a private party of some fifteen persons, including Dr. J. Gordon Smith, Mr. Titus Bury, the surgeon, and other scientific men. Having armed himself by the antidote which he has found to be a guard against animal poisons, M. Chabert swallowed *forty grains of phosphorus*, in the presence of the astonished company.* The phosphorus was distinctly put upon his tongue by a gentleman, and beyond all doubt fairly taken into the stomach,—nearly, if not quite enough, we presume, to have killed all those who saw this feat done. His next exploit was to sup two spoonful of oil, at 330 degrees by the thermometer, i. e., 120 degrees above the heat of boiling water. This he did without any apparent inconvenience; though

* The enormity of this dose will appear, by referring to an article of intelligence on our 479th page, entitled "Death from Phosphorus."

the spoon remained for minutes so hot that no one could bear to touch it with his hand. Finally, M. Chabert held his head directly over and in the midst of the fumes of arsenic, which, diffusing over a large room, speedily became too potent to be inhaled with impunity by any other being who was present. After all this (we add with something like satisfaction at his escape, and at our own good luck in not being accessories to murder or suicide), we had the pleasure to see the performer eat a good dinner and drink his wine, just as if he had taken a rusk and a sip of sherbet, by way of whet.

As it may be asked, to what useful purpose can these astonishing proceedings contribute? we should assert, that M. Chabert affirms his ability to save the lives of men from every species of poison; and that his antidotes, administered in adequate time after the poison has been swallowed, are as effectual as if previously taken. He farther says, that he has *three* antidotes,—one a preservative against vegetable, another against animal, and a third against mineral, poisons; so that those of the whole kingdoms may be met and overcome. Even the fatal hydrocyanic, or prussic acid, he professes to take with safety; and, from having withstood the bites of vipers and other venomous creatures, he is of opinion that his remedy would be a specific against the bite of mad dogs, and a cure for hydrophobia. Now, without pledging ourselves to unhesitating faith on all these points, we cannot, seeing what we have seen with our own eyes, doubt that M. Chabert's knowledge of antidotes, and experience with respect to poisons, is

eminently worthy of medical investigation; and, if he really possess such important secrets, that they ought to be ascertained, and be largely rewarded, as a public benefactor. It is for these reasons that we have published this account, and that we invite our physicians, chemists, and other people of scientific intelligence, to inquire into M. Chabert's pretensions, and, if they are sooth, to establish them for the good of mankind.

We may here take the opportunity of mentioning that M. Orfila, the celebrated French chemist, has recently been making a series of experiments with hydrocyanic acid, chiefly for the purpose of ascertaining the proper means of restoring a person to life, where it is practicable, after taking that poison. Hitherto the remedies prescribed have been strong infusions of coffee and oil of turpentine; but seldom with good effect. M. Orfila recommends, first, an emetic; second, the application of ammoniacal or chlorurated water to the nostrils, bleeding from the arm, and the application of leeches behind the ears; third, the affusion of cold water, in the way prescribed by a German physician, M. Erbot. M. Orfila states that these means will restore the patient, unless the quantity of prussic acid taken has been very great. In order to ascertain the presence of this poison, he recommends the use of nitrate of silver, by which the acid will be precipitated in the form of cyanure of silver. In case of poisoning by opium, he recommends, previous to the administration of emetics, a strong decoction of nutgalls, for the purpose of decomposing the opium.

IV.

TUMOR WITHIN THE ILIUM.

Some Account of the Disease and Examination of the Body of the late Dr. J. G. Coffin, of this City; Communicated in a Letter to the late Dr. Gorham.

Brookfield, Jan. 26, 1829.

MY DEAR SIR,—It was the request of the late Dr. Coffin, that I should investigate the nature and seat of his disease by an examination after death, and should communicate the result to yourself and Dr. Hayward, who had administered to his relief while in Boston. This task I have most cheerfully performed, and feel happy that a man so distinguished by his scientific acquirements, should have made the request, accompanied with this noble sentiment,—that, “as he could be no longer useful while living, he wished to be so after death.” I prefix a short history of his disease, which (if you think it worth while to publish the notes of the examination) may be published with them in the Medical Journal. I am, dear sir, with much respect,
Your obliged servant,

JOHN HOMANS.

John G. Coffin, M.D., possessed a good constitution, which, though not of the firmest order, yet, for the last twenty years, enabled him to perform his professional labors without two successive days' confinement by bodily indisposition, until August, 1827. His labors did not consist merely in visiting the sick. In that month, he was attacked with severe pain in the right side, just below the ribs, which he supposed to be colic, having been subject to it for many years. This pain continued for

forty-eight hours with little or no intermission, attended with constipation of the bowels and nausea. On the 3d day, after copious dejections, he was so far relieved as to be able to ride a short distance. After this, his digestive organs became impaired; he grew feeble, had inclination to evacuate the bladder frequently, followed by pain over the symphysis pubis, and always felt uneasiness, varying in intensity only, in the right side, the seat of the first pain. In this state he remained for several months, but gradually declining in strength, and diminishing in size and weight, till the following June, when he went to Philadelphia, thence to Newberg,—whence he returned to Boston, much exhausted by an exacerbation at Newberg. In October he had another severe attack, and a fourth in December. After this he came to Brookfield by slow stages. For several months a diarrhœa had attended him; this now increased so as to reduce him to the bed, when, on the 17th and 18th inst., he underwent the last severe sufferings by an attack much like the former ones. He survived this but a few days, and died on Friday, the 23d inst. The symptoms in all these attacks were similar, the pain occasionally extending to the hips, and in the last attack the pain was more severe in the left hip and over the left side of the pubis. Frequent calls for passing urine attended him throughout the disease.

Examination, four hours after death.

Body exceedingly emaciated. The right side, between the diaphragm and the right ilium, prominent. On dividing the skin and muscles, the vessels of the omen-

tum were found turgid, and the omentum, the contracted blood-vessels of the peritoneum, and the colon and small intestines, except the duodenum, were distended. The liver, stomach, and duodenum wore a healthy appearance; spleen somewhat enlarged, and harder than usual: mesenteric glands were enlarged. The intestines on the right side adhered to each other in some measure. Between the umbilicus and the anterior superior spinous process of the ileum, was a tumor, nearly as large as the kidney, enclosed

by the intestine ileum at its junction with the cæcum and colon, hard, irregular, and sarcomatous.* On opening the tumor, pus was discharged; it consisted of flesh growing from the side of the intestine. The ileum, for twelve inches from this, was nearly purple. A concretion of the size of a pea, was found in the ductus communis. The coats of the bladder were rigid, and on the left side were two tumors, one of the size of an English walnut, the other of a common walnut, caused by rupture of the muscular coat.

SKETCHES OF PERIODICAL LITERATURE.

CAPACITY OF THE LUNGS.

THE amount of air which the human lungs are capable of receiving under a variety of circumstances, is very differently stated by authors who have written on the subject. With a view to obtain some accurate results on this point, Dr. Herbst, of Gottingen, has instituted some experiments, the results of which seem worthy of considerable confidence. The apparatus employed by Dr. H. is very simple, consisting of a graduated bell jar standing in a vessel of water, and having a stop-cock at its summit, connected with a glass tube shaped like a horizontal S. Breathing out of this jar, produced at first some embarrassment, and the function was not naturally performed. By a little practice, however, the difficulty was overcome, and the inspiration was made with the same ease as if performed in the open air. The accuracy of the results was verified by causing an equal number of

expirations to be made into the jar filled with water.

The quantity of air inhaled in easy inspiration, was found to be from 20 to 25 inches in men of ordinary stature. The extreme capacity of inspiration and expiration varied much in different persons. A robust man, 22 years of age, after full inspiration, expired 180 inches; after full expiration, inspired 184. A small man of the same age, under like circumstances, expired 144 inches. Two fat men, otherwise stout and healthy, did not exceed 140. The greatest expirations noticed, were 232 and 244 inches; both in very powerful men, one tall, the other of middling stature. The capacity was much diminished by tight clothing, and the difference in men when dressed and undressed was very striking. In women, the capacity of the lungs is

* This tumor is now in the anatomical cabinet of the Massachusetts Medical College.

much inferior to that of men; the greatest expiration mentioned being 144 inches. From experiments of the bodies of men who died suddenly when in health, Dr. H. found that the lungs, when distended as far as possible without tearing them, never held more than 186 inches. This fact, in connection with those above stated, seems to show that very little air can remain in the lungs after a forcible expiration. The capacity of the lungs is very much diminished by disease. The full inspirations of two individuals affected with phthisis, were 42 and 46 inches. Animals, in proportion to their weight, have a much greater capacity than men; a fact which corresponds to the advantage they possess in point of muscular strength. The capacity of the lungs in grown up cats, is from 20 to 24 inches, and in dogs the disproportion is equally great. The speed possessed by these animals, and the length of time they can continue in motion without fatigue, must depend in part on this circumstance.

ULCERS ON THE CORNEA.

A VALUABLE paper on this subject appeared in the July number of the Edinburgh Journal. Mr. Wilson, the author, treats generally of those ulcers on the cornea which penetrate the stricture, and permit a discharge of the aqueous humor. This unfortunate occurrence may be known by a gradual failure of sight from morning till night, and a restoration of it in the morning; by a shrivelling of the ball of the eye in the evening; or by actual microscopic examination. The first symptoms are ascribed to

the circumstance, that the humor is discharged in the greatest quantity when the eye is in motion, and the well-known physiological fact, that this humor is reproduced with great rapidity. In the treatment of ulcers on the cornea, Mr. B. comes to the following conclusions:—

“1. Caustic ought to be very cautiously applied in ulcers of the cornea; for if, by its incautious application, repeated sloughs are formed, an opening will be made through the whole thickness of the cornea, and the eye will be exposed to the destructive changes of structure above described.

“2. When protrusion of the iris takes place from a sloughing ulceration of the cornea, no attempt should be made to replace it into its natural position. It is rather to be considered a fortunate event, as the only way by which the further destruction of the eye may be prevented.

“3. This natural process by which a breach in the cornea is repaired, may, in some cases where the evacuation of the eye is threatened, be advantageously imitated by art. This might be accomplished by making pressure upon the eyeball, or a small hook might be introduced through the opening in the cornea, with which a portion of the iris might be drawn out and strangulated so as to adhere. In performing this operation, care should be taken to draw out the ciliary rather than the pupillary part of the iris, in order that the size of the pupil may be diminished as little as possible.”

ACTION OF THE ARTERIES IN THE CIRCULATION.

THE question as to the seat of the motive powers which produce the circulation, has been more or less agitated ever since the time of Harvey, and seems likely to exercise the

ingenuity of physiologists for a considerable period. Among other doubts, it has been doubted whether an actual dilatation of the arteries occurs among the systole of the heart. To determine this point, some ingenious experiments were made by M. Poiseuille, of Paris, on the carotid ar-

tery of a horse. The result of these was, that at each pulsation the capacity of the vessel was increased by about a thirtieth part. Of course, during the diastole, the artery restored itself, by its elasticity, to the same diameter which it previously possessed.

BOSTON, TUESDAY, SEPTEMBER 8, 1829.

ANTIQUITY OF SMALLPOX.

THERE is certainly no subject connected with medical science, which, in proportion to its real importance, has been more earnestly and zealously investigated, than that of the analogy which may be traced between ancient diseases and those which constitute the nosology of modern times. Not only have the medical works of former days been most carefully translated and commented on with this view, but there is scarce a passage in any sacred or profane author descriptive of disease, but it has been so amended, explained, and amplified, as to become a complete description of some modern malady. Indeed, so great has been the ingenuity of some commentators, that all difficulties have vanished before them; and such their confidence, that neither the acknowledged ignorance of their authors in medicine, the paucity of the facts detailed, nor the ambiguity of the language in which they are described,—an ambiguity almost inseparable from the terms of science in the more ancient languages,—can inspire them with any doubt as to the accuracy of their conclusions. This, however,

has generally been noticed where there was some peculiar theory, a priori, to be supported. Men of learning, not biassed in this way, have acknowledged the difficulty attending these investigations; and the diversity of results obtained by different persons from the same premises, bear ample testimony to the sincerity of the confession.

These remarks have been suggested to us, in the present instance, by some speculations of Dr. Baron, the distinguished author of the life of Jenner,—the object of which is to show that the disease of smallpox, instead of being, as is generally imagined, of comparatively modern origin, has in fact existed from the earliest times, and certainly as far back as the days of Moses. Whether this point is sufficiently made out or not, we will not say; but some of the citations on which he builds his theory, appear to afford to it but a slender foundation. He finds smallpox in the boils inflicted on the ancient Egyptians, smallpox in the pestilences of ancient Rome, and smallpox in the plague of Athens. In respect to the first discovery, we apprehend the Doctor is indebted

for it, in a considerable degree, to his own imagination. In point of probability, it is very much upon a par with the irreverent suggestion of a late writer on syphilis, who conjectured that the malady with which David describes himself as afflicted, (Ps. 38,) could be no other than the one at present known by that title.

To suppose that a disease expressly recorded as miraculous, and as visited on a people for their punishment, was entailed on mankind from that period, although no allusion is made to such a fact in the sacred history, and no trace can be discovered of anything similar for a thousand years after, certainly seems a little extravagant. As for the pestilence which so often visited Rome, the accounts of it by the historians are too vague to warrant any precise inference, and many circumstances which must almost necessarily have been noticed in smallpox, are omitted. The plague of Athens is more accurately described by Thucydides, who possessed peculiar advantages, and probably recorded what he saw in language which, to those for whom he wrote, was perfectly clear and unambiguous; yet, as translated into English, his description conveys but an imperfect idea of the precise symptoms. The most striking and exact portion of it, is thus rendered by Dr. B. :—"Some persons, from no ostensible cause, but on a sudden, being in health, were first seized with violent heats of the head, and redness and inflammation of the eyes; and as to the interior of the head, the throat and tongue were immediately bloody, and the breath emit-

ted, bad and foetid. Next after these symptoms, sneezing and hoarseness came on, and in a little while the disease descended into the chest, with a violent cough. And when it settled in the stomach, it both turned it, and all offscourings of bile that have been named by physicians succeeded, and these with great distress. The greater part were affected with a fruitless hiccough, attended with strong spasm; with some, having immediate interval of ease, with others much later. And the body to the outward touch, was not very hot, neither was it pale; but somewhat red, livid, effloresced with small pustules and blotches." That some of the phenomena above mentioned are also those of smallpox, is certainly true; but the resemblance is by no means sufficient to determine the identity of the diseases, even making some allowance for the change which smallpox may have undergone in the course of transmission through a series of generations. A person disposed to prove that a severe form of measles or scarlet fever existed in former times, might find many points in the description of Thucydides to confirm his theory; and it is only by coming to the examination of such subjects with a mind wholly unprejudiced, that any one can hope to arrive at just and correct conclusions.

ANATOMICAL DISSECTION.

MR. WARBURTON's bill for the regulation of anatomical schools in England, while its fate was uncertain, found very various degrees of favor in the eyes of different individuals of the profession. Its failure, however,

will check the cavils of its opposers, and will probably be regarded as a misfortune by the whole medical community. Its provisions were briefly as follows:—That a commission should be appointed, to consist of not more than seven persons, the majority of whom should be non-professional, and none of them engaged in any school of anatomy. These commissions were to have the power of granting licenses for the establishment of anatomical schools, of inspecting the mode in which they were conducted, and of forming a code of laws for their due regulation. That no person should keep a school for dissection of human bodies, or perform such dissection, or permit it to be performed, in any place belonging to him, without license from this commission, under penalty of one hundred pounds. That, whenever any person died in a prison, hospital, or workhouse, and the body was not claimed within three days by any friends or relatives, it should be lawful for the person having the care thereof, to deliver the same to any party duly licensed as above, for the purpose of dissection. That, if any person, during his life-time, by writing or before witnesses, declared his wish to be dissected after death, it should be lawful for his administrators, if they saw fit, to deliver up the body for that purpose. That, to any person wishing to dissect privately, not being connected with any school, the commissioners should be authorized to grant a license for a sum not exceeding two pounds. That every person receiving a body for dissection, should receive with it a minute

of the date of delivery, of the name, age, sex, and place of abode of the deceased, and enter the particulars on a book to be kept for the inspection of the commission. That the remains of every body after dissection, should, at the expense of the party dissecting, be enclosed in a separate coffin and interred with the rites of Christian burial, and an entry be made, in the parish register, of the date of burial, the name, age, and abode of the deceased, and the name of the officiating minister.

Such is a brief outline of this bill, which, in its technical form, includes eighteen separate enactments, and presents to the legally unlearned reader, a somewhat formidable and forbidding aspect.

We have said that there existed concerning it considerable discrepancy of opinion; and we may add that, on the whole, it was not viewed with much favor by those for whose benefit it was intended. Some inconvenience and difficulty were apprehended from the mode proposed for the granting of licenses; and the provision for the burial of the dead was regarded as useless and cumbersome. Such as it is, however, it would certainly, in its operation, have tended to prevent those gross outrages which the cultivators of anatomy are obliged to commit or encourage, and remove many of the obstacles which now oppose themselves to the acquisition of that science. The subjects were to be obtained from the prisons, hospitals, and almshouses,—all institutions supported at the public expense,—and the former because their inmates are

guilty of crimes which render them unworthy to associate with their fellow-men. Three days were allowed for the application of friends, and during this time the body might be taken by any person who claimed it, for interment. The provision which regards the minutes to be kept by the dissector, made it necessary for every one having a subject, to be ready to show that it came fairly into his possession; and the penalties affixed to the violation of this and the other provisions, were such as might be supposed to ensure their faithful execution. On the whole, it is the last effort for the legislative protection of anatomy abroad, that will probably be made for a long period; and the friends of humanity may well lament that it should have been attended with so little success.

SUBCARBONATE OF AMMONIA.

Its Effect on the Cutaneous Functions.

THE value of the Subcarbonate of Ammonia in diseases of the skin is but very partially known. Dr. Wilkinson wrote a pamphlet recommending it several years ago; but his praises were so extravagant, and his cases of cure so wonderful, that his work never received, we apprehend, the credence and general perusal which it merits. We have often found chronic diseases of the surface, which could not be reached by ordinary remedies, extremely ready to submit to the power of Ammonia. It should however be given in much larger doses than usually prescribed, and these should be repeated more frequently. By way of illustrating

this subject, we beg leave to refer the reader to the following satisfactory, and by no means extravagant case, which recently occurred at the Hospital St. Louis at Paris.

"P. M., 38 years old, emaciated, and of a very weak constitution, observed, in the month of July, a particular eruption on his forehead; this having been suppressed for a time, by a nostrum, the composition of which was unknown, soon returned again, with a tendency to form ulcers, and began to spread over the whole body. On his admission into the hospital in September, under the care of M. Biett, he was in the following state:—Almost the whole of his body, but especially the inferior extremities, were covered with ulcerating pustules of different sizes; in the centre of each pustule there was a prominent, black, very hard crust, surrounded by a white ulcerating margin; the epidermis round the ulcers presented a copper-colored defined areola. In these pustules, where the crusts had been detached, the surface was excavated, much injected, and covered by greyish-white tenacious matter; the skin between the pustules exhibited livid blotches, the scars of former ulcers. The patient had, in 1814, successively been affected with gonorrhœa, chancre, and bubo, and had never had recourse to a proper mercurial treatment; he was married, and his wife, who had borne several healthy children, had never presented any signs of infection. His general health was good.

"M. Biett, having for some time employed cinnabar fumigations, and the alkaline bath, prescribed the Subcarbonate of Ammonia, from the use of which he had, in similar cases, observed very satisfactory effects. The patient took a drachm daily; and this being borne very well, and without the least disturbance of the digestive organs, the dose was after-

wards increased to two and even to three drachms. The crusts were gradually detached, and the excavated ulcers became more superficial and assumed a healthy appearance; so that the patient, after having used the Subcarbonate of Ammonia for twenty days, was perfectly cured."

PREGNANCY, COMPLICATED WITH MALIGNANT TUMORS.

ROSALIA JULIEN was married in 1822, at the age of 27, and after the lapse of three months, miscarried, the foetus apparently of about six weeks. Nine months after this her husband died. The widow, greatly affected, suffered from derangement of health; she observed, notwithstanding the menses were regular, that her abdomen increased in size; a sense of weight obstructed her in walking, and she had frequent desire to pass her urine. In the course of three years, the size of the abdomen increased slowly, and at the end of that time it assumed the appearance of a person about four or five months gone with child. M. Troussel, consulted in 1826, recognized in the hypogastric region a hard, round, indolent tumor, dipping down into the pelvis, easily detected by the touch either through the rectum or vagina, having about the size of the head of a full-grown foetus. This tumor had depressed the uterus, but without deranging the menstruation, or disordering any of the other functions. From the above period the abdomen did not increase in volume, the general health continued good, and, in January, 1828, the woman was married again. In the month of April following, there was reason to suspect pregnancy: the abdomen enlarged so as to make walking troublesome; shooting pains in the hypogastrium, particularly on the right side, took place: nevertheless, the condition of the uterus could not be ascertained. The belly continued to increase, especially on the right side; the patient was obliged

to remain in the recumbent posture; the pain became more frequent and severe; sleeplessness, emaciation, fever, and diarrhœa ensued; and death took place on the 5th of September, 1828. On opening the body, the abdomen was found almost entirely occupied by an enormous tumor, of from 13 to 15 inches in diameter, having a fibrous appearance, and presenting within it several isolated cavities, formed in a scirrhus, encephaloid tissue, of a reddish white color, and of a variable consistence; the uterus was pushed into the left side of the abdomen, and contained a foetus of four or five months. In the parietes of the uterus, four small tumors, of a fibrous nature, were found. The large swelling had been developed between the two layers of the broad ligament; it adhered to the uterus, for a considerable extent, by a dense cellular membrane, and by a kind of pedicle, short and broad, about an inch across, of a fibrous nature, intimately united to the fibres of the uterus, and fixed to the right side of that organ near the insertion of the vagina.

The reporter makes no mention of the relations of this tumor with respect to the ovary of the same side; but, from its situation, it may be presumed to have had its original seat in that organ.—*Bul. des Sc. M.*

Extirpation of the left Ovarium.—

A woman, 38 years of age, had borne five children in the space of seven years. After her fourth delivery, she suffered from inflammation of the womb: from that period she complained of a dull pain in the left side of the hypogastrium, and about a year and a half after her last confinement, she perceived a small tumefaction on the left side: a few sulphur baths caused it nearly to disappear for a time, but latterly it had extended over the abdomen. Two years subsequent to this, her menses were followed by a malignant fluor albus, which added to the debility already

induced. Dr. Chrymer having decided on the nature of the affection, and the patient having consented to the operation, it was performed by making an incision from the xyphoid cartilage to the pubes, leaving the navel to the right. The opening made into the peritoneum caused a prolapsus of a great part of the intestines: they were immediately enveloped in a warm and moist cloth. The adhesions of the tumor to the peritoneum and to the edge of the pelvis were then divided, and a double ligature was applied to the pedicle of the tumor attached to the broad ligament, which was divided an inch below the ligature. The intestines, which had been wrapped in the towel about five or six minutes, were then replaced within the abdomen, the serosity accumulated in the pelvis was wiped off with a sponge, and the wound closed by suture. The operation lasted a quarter of an hour, and the patient lost only a few ounces of blood. An emulsion, containing nitre, was ordered immediately, and hiccough, with cold shivering, showing themselves after some little time, some doses of laudanum were administered. The cure was not interrupted by any accident, and at the end of six weeks the woman returned to her native place. Since this operation she has borne a healthy child. The tumor weighed eight pounds, exceeded in size the head of a child, was irregular on its surface, livid in some places, and within, presented cavities, some filled with a fluid of the consistence of honey, and others with a greenish and sanguinous liquid.—*Graefe & Walthe's J.*

Five cases (of which the above is the fourth) wherein operations for the extirpation of diseased ovaria were either attempted, or actually performed, are published in the "Archives Générales" for May. The above case was successful. In the first, the tumor was so attached that the extirpation could not be performed; the abdomen was there-

fore closed, and the woman escaped with difficulty from the consequences. In the second, the patient died thirty-six hours after the operation. In the third case, also, the patient perished at the same period. In the fifth case, the tumor was so firmly adherent that it could not be removed, but the operator cut away the sac, and was under the necessity of securing some arterial branches. The woman died in thirty-six hours.

Observations on the Influence of Cold on New-born Children.—Dr. Trevisan has been making researches in Italy, principally at Castel-Franco, analogous to those of MM. Villermé and Milne Edwards in France. The conclusions at which he arrives, are,—1. In Italy, of 100 infants born in December, January, and February, 66 died in the first month, 15 in the course of the year, and 19 survived;—2. Of 100 born in spring, 48 survive the first year;—3. Of 100 born in summer, 83 survive the first year;—4. Of 100 born in autumn, 58 survive the first twelve months. He attributes this mortality of the infants solely to the practice of exposing them to cold air a few days after their birth, for the purpose of having them baptised at the church. As well as MM. Milne Edwards and Villermé, Dr. Trevisan calls the attention of the ecclesiastical authority to measures suited to put a stop to such disasters, without violating the precepts or practices of religion.—*Brande's Journal.*

Fatal Mistake in a Prescription.—When we consider the hurried manner in which medical men often write their prescriptions, it appears wonderful that so few mistakes should occur; nevertheless, the following case will show the necessity of caution, and the propriety of the physician *invariably* reading over his prescription with care, before he sends it to the chemist.—Dr. B., of Montague, states, that he was consulted

about a child on the 26th of May, for whom he recommended ten grains of sulphate of quinine in a lavement. In writing his prescription, however, he inadvertently substituted the word **MORPHINE** for **Quinine**. The injection was administered, and the child died in a few hours! It is creditable to Dr. B. to give publicity to the fact, as a warning to others; and the manner in which he expresses himself shows the indelible impression which the event has made on his mind.

Death from Phosphorus.—A chemist at Biel, wishing to make experiments on the action of phosphorus, took a grain of that substance with sugar on the 20th of October last. Next day he took two grains; and on the 22d, three grains. Towards evening he experienced great uneasiness, particularly in the abdomen; but these symptoms he unaccountably attributed to rheumatism, and employed no remedies. On the 24th, he was seized with constant vomiting, and the matters ejected had the odor of garlic. Medical assistance was now called on, but without avail: inflammation of the alimentary canal took place; on the 29th he had spasms, and the left arm became paralyzed. He was delirious, and soon after expired, having fallen a victim to his incautious experiments.—*Med. Gaz.*

Anomalous Vertebral Artery.—M. A. Meckel, of Berne, on opening a dead body, observed a curious case of the above kind. There were three vessels on one side: the first, of middling size, arose from the posterior part of the subclavian, where it usually takes its origin; the second, larger in size, arose more deeply from the anterior portion of the same vessel; and the third, which was considerably smaller, was a branch of the inferior thyroid. These three vessels united above the transverse apophysis of the fifth cervical vertebra, and then formed one vessel,

which pursued its usual course to the head.—*Archives Générales.*

Singular Case of Cataract.—A robust peasant, about 60 years of age, who had never experienced any ill health, except slight attacks of gout, was occupied in cutting wood in a forest, when he was suddenly seized with a dimness of sight, which gradually increased till, at the expiration of a few hours, he was entirely blind, and obliged to be led home. He had no pain, and there was no inflammation visible. In a few days after, he was seen by Dr. Wondelstrom, who found that both eyes were affected with cataract. The operation of extraction was performed.—*Swedish Journal.*

Curious Phenomenon.—While the workmen were employed in laying and soldering the iron pipes for conveying water, in Winchester, Va., a few days since, "electric shocks were produced to such a degree as to cause them to discontinue their labors during the remainder of the day. Several citizens who were standing by, got into the ditch and tried the experiment, when the effect was the same on all." The pipes are united in the same manner as those in this city; and the Winchester Republican remarks, that "it was in driving closely the soldering lead that the shock was produced. The sun was nearly vertical, the thermometer at 93 degrees, the ditch somewhat damp, and the pipes warm from the action of the sun upon them. The principle is no doubt that of galvanism."—*Dem. Press.*

REPORT OF DEATHS IN BOSTON,

The week ending August 29, at noon.

Of bilious fever, 1—consumption, 8—canker in the bowels, 1—dropsy, 1—disease of the spine, 1—debility, 1—dysentery, 1—drown, 1—intemperance, 1—measles, 7—old age, 2—paralysis, 1—unknown, 2. Males, 10—females, 14. Stillborn, 1. Total, 25.

ADVERTISEMENTS.

CARTER & HENDEE have just published,—*The Constitution of Man*, considered in Relation to External Objects. By **GEORGE COMBE**.

From the Preface to the American edition.

"Mr. Combe's work should be placed with those, of which so many within a few years have appeared, which are devoted to the all-absorbing topic of Education. It treats of moral, intellectual, and physical education. This is not formally done under so many distinct heads. But the whole course of reasoning of the author, and the whole array of all his illustrations, have it always obviously in view to show how the highest cultivation of each of these may be most surely brought about.

"The publishers have printed this edition from a belief that there is much in the work to interest the community.

"It has a novelty to reward the general inquirer, and it presents the well known under novel aspects. There is one class amongst us who may study it with much advantage. Scholars are referred to, a class here too small to form a distinct order with habits of their own, and who insensibly fall into those which, although not mischievous, to the multitude on the score of health, too often make ill health the portion of the sedentary student, and bring upon him premature decay.—To all classes it is recommended, and the various learning and acuteness of the author well fit him to write a book which addresses its instructions to the whole community."

Sept. 8.

CONSOLIDATED COPAIVA.

"**COPAIVA** may be given in this form without the least inconvenience. Neither communicating taste, nor imparting odor to the breath, it is also retained without the least disquietude or uneasiness to the stomach; and I am informed by Dr. Rousseau, that in large doses it does not purge."—*Phil. Journal of Med. Sciences.*

See an article in this Journal, Aug. 18th.

OIL OF BLACK PEPPER.

This is a much more active preparation of Piperine. One drop is fully equal to six grains of the latter. It is a valuable adjunct to Quinine. One or two drops, added to six grains, will greatly increase the efficacy of that medicine.

For sale by **NATHAN JARVIS**, 188 Washington Street, where Physicians will find medicines at as reasonable terms as at any place in Boston.

Aug. 25.

coptf.

A TREATISE on the Scrofulous Disease, by **C. G. HUFELAND**, Physician to the King of Prussia, &c., translated from the French of **M. Bousquet**, by **Charles D. Meigs, M.D.**, is just received and for sale by **CARTER & HENDEE**.

Sept. 8.

EUROPEAN LEECHES.

RICHARD A. NEWELL, Druggist, respectfully acquaints the physicians and families of the city, that he has made arrangements with one of the first mercantile houses on the continent, to be regularly supplied with the Genuine Medicinal Leech. He has now on hand a fresh supply, just received, which are for sale.

N. B. The difficulty of obtaining genuine Leeches by the usual way has induced him to make the above arrangement at considerable expense, and he hopes it will meet the approbation of the medical faculty. Summer-street, opposite Purchase-street.

Sept. 1.

3t.

BERKSHIRE MEDICAL INSTITUTION.

THE Annual Course of **LECTURES** will commence on the first Thursday in September, and continue fifteen weeks.

Matriculation ticket, \$3. Fee for Lectures, \$40. Library ticket, \$1. Graduation, \$15.50. Board, including washing, lodging and room, \$1.75 a week.

Pittsfield, July 22, 1829. aug4sept30

EUROPEAN LEECHES.

CHARLES WHITE, No. 269 Washington street, corner of Winter street has just received a fresh supply of **EUROPEAN LEECHES**, extra large and in prime order. Also, by the late arrivals, a general assortment of **MEDICINE**.

••• Strict personal attention paid to Physicians' prescriptions and to the compounding and delivery of Family Medicine, and all favors gratefully received.

Sept. 1.

Published weekly, by **JOHN COTTON**, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

THE BOSTON
MEDICAL AND SURGICAL JOURNAL.

VOL. II.]

TUESDAY, SEPTEMBER 15, 1829.

[No. 31.]

I.

GODMAN ON TIGHT LACING.

*Injurious Effects of Tight Lacing
on the Organs and Functions of
Respiration, Digestion, Circula-
tion, &c.*

It is not without hesitation that the writer ventures to call attention to the injuries produced by TIGHT LACING, being well aware that he is exposing himself to the chance of severe animadversion for appearing to meddle officiously with the concerns of the fair sex, who never fail to punish every encroacher upon their rights and privileges. Notwithstanding, as our object is, if possible, to avert great suffering and much future misery, by setting forth the evils following manifest abuses, introduced and augmented by fashion, we hope due indulgence will be extended by our fair readers, whose real good we are most solicitous to promote.

The observations of various authors have satisfactorily shown, that certain errors in dress and exercise induce deformity of person and unhappiness of mind; but their attention is almost entirely devoted to the injuries done to the organs of support and motion, the bones and muscles.* Great as are the evils they treat of, they seem slight when compared with the

pernicious effects of similar causes, on organs more immediately essential to the life of the individual, the disarray of which, though not signalized by very obvious deformity, is inevitably followed by protracted debility and suffering, an early, rapid decay, or a painful and premature death. It is impossible for a benevolent mind, acquainted with the reality and extent of the mischief thus produced, to behold youth, grace and beauty sacrificing the dearest boons of life to the tyranny of perverted taste and preposterous fashion, without experiencing emotions of profound regret for the immediate victims, and sighing for the future condition of a posterity derived from such a parentage!

In what way can the hitherto irresistible torrent of fashion be stemmed? Have not reason and experience been appealed to in vain? Have not the shafts of satire, the serious remonstrances of morality, and even the awe-inspiring declarations of religion, too often fallen ineffectual to the ground? One mode of producing the desired conviction in the minds of females, has been left almost unattempted; and from the operation of this method much is to be hoped. It is by imparting to "nature's last, best work," a sufficient knowledge of the peculiar construction of the human system, to place in the clearest light the dreadful risks

* See the works of Shaw, Duffin, &c., on Deformities of the Spine, &c.

that the evils we have indicated are confined to a comparatively small number, and that a much greater proportion of females wear corsets without suffering these inconveniences or injuries. However true it may be that some persons use corsets with impunity, it does not in the least diminish the force of the well-founded objections made to them in the preceding observations: it may be said with equal truth, that numerous individuals use spirituous liquors, or amuse themselves by occasional gaming, without injury; yet we know that the vast majority of mankind are but too prone to pass from the use to the abuse of both the latter; and as in the case of spirituous liquors, the transition from the use to the abuse is frequently so gradual as to be nearly imperceptible until the severest evils are produced, so it is most probable, especially in young persons, that the use of corsets and busk will speedily and imperceptibly advance to their abuse. There is one circumstance, moreover, which should be particularly remembered, which is, that although ladies properly educated, and aware of the danger of misusing corsets, might employ them without especial injury, the females of lower ranks in life, who imitate what they see in those above them, without reference to cause or consequence, will almost inevitably be led to do themselves the worst injuries. We see daily confirmation of this in the attempts of female attendants, &c., to imitate their employers, in the article of *lacing* at least, nor is it at all uncommon for such young women to be obliged to consult physicians for various supposed diseases, which are the immediate results of their prepos-

terous attempts to make themselves "fine figures." Many of them, with this view, keep on their corsets and busks all night, *tightening*, when they lie down, instead of loosening them, and again in the morning drawing them still closer, — considering every successive half inch in the compression and diminution of the lower part of the chest, as so much "clear gain."* The consequences that speedily follow are, loss of appetite, headache, palpitation, and most of the sufferings already mentioned.

After all our researches, we have not been able to discover the exact origin of this ridiculous and

* Not long since, the following scene occurred under our notice, at a boarding-house in Philadelphia.—The girl of the house, a tall, good-looking young woman, at the proper time in the afternoon filled the tea-kettle, and brought it to the kitchen hearth, where she placed it on a bench. To place it over the fire required considerable stooping, and this, as it turned out, was impossible to her. Repeated and fruitless were her attempts, by a sort of crouching attitude, to accomplish her object; there was no one present to assist or to relieve her from the restraint which prevented stooping, and at length in despair she gave up her trials, and stood by the kettle as if debating what she should do. The mistress came to inquire if the water was boiling, and found it not yet on the fire!—To her utter astonishment, "the young lady" confessed that she had her "*long busk*" on,—that her "*lacing*," which was excessively tight, was in a "hard knot," and that she "could not possibly stoop" to put on the kettle! On another occasion, the writer was obliged to stop and admire one of those faithful imitators of high life, who, attired in a rich, yellow barege frock, with gorgeous balloon sleeves, and *laced* to a most fashionable degree, was occupied in sweeping out one of the filthiest gutters in Seventh Street! Nothing was wanting to complete the picture, but one of the exquisitely dressed and Russian belted "gemen," we occasionally see in the streets, to have shaded her with an umbrella, while she was engaged in discharging this receptacle of "liquid sweets."

injurious mode of dressing. That in one modification or other it has been employed among Europeans for ages, we have unquestionable proof. The circumstance of its being confined principally to those countries whose moral and religious codes have a common foundation, forces us to conclude that the contrivances of stays, corsets, &c., were designed to *conceal*, as far as possible, the consequences of levity and imprudence. The idea of improving the figure by their use, was originally a mere excuse to cover the *real* object for which they were worn. The disposition to imitate, so common to the human race, favored the views of the depraved and designing, and multitudes of elegant and innocent women fell into a fashion which promised improvement to their personal charms, while in reality it was productive of their destruction. The same phantom of augmenting attractiveness by their employment, contributed to prolong the illusion to the present time, and as our fashionable females have felt the influence produced on their mothers by this folly, we have now the superadded excuse of need of support, on account of muscular debility, urged for its continuance. It is not a little curious to observe the effect that has been produced on female sentiments, by the operation of this cause. The object being to look slender (graceful is utterly impossible, if the body thus dressed be in motion), all rotundity of person is regarded as vulgar or inelegant, though nature has taken infinite pains to render all living forms round and swelling, both externally and internally. Hence the youthful and unmarried are exceedingly desirous, by aid of cord and busk, to look *flat*, and in every sense of

the term are successful;—the same horror of rotundity follows them through life, and nothing is so common as to find those who have lived and dressed with an exclusive view to gain husbands, with all the mawkishness of false delicacy, using injurious efforts to conceal their approach to the endearments and respectability of maternity. Far be it from our thoughts to wish that our matrons should, in the slightest degree, abate of their sensitiveness on this or any other subject connected with purity of mind; but a close and somewhat protracted observation has fully convinced us, that, from the cause we have mentioned, and others we dare not speak of, an excess of false delicacy under such circumstances has become fashionable. If all the rest of the world were to resolve on the use of tight lacing, mothers should determine to lay it aside, if only in compassion to their offspring, whose health and happiness may otherwise be entirely sacrificed. If we make strict examination among children of *fashionable* parents, we shall find proof sufficient of this, even if nothing worse be discovered than pale, delicate, rickety, or scrofulous subjects, whose appearance proclaims imperfect health with enfeebled and easily injured constitutions. The injuries produced on many delicate females by tight lacing, before and after marriage, have been sufficiently great, in numerous instances, to destroy all the joyous hopes and anticipations which are incident to maternity, and rendered the conjugal condition one of unceasing disappointment and gloomy solitude.

Enough, however, has been said on this subject, although we have given but an imperfect catalogue

of the mischiefs produced by tight lacing. Much of what we have said will be regarded by tight lacers as a mere attempt to alarm, because they have not yet especially suffered from this cause. If inquiry be made of physicians residing in our cities, ample confirmation of all we have stated may be obtained, and proofs of still greater evils from this cause afforded.* We cannot, however, hope to effect much against the preponderating influence of fashion, considering how often it has been attempted by others unsuccessfully. Nevertheless, we have esteemed it a duty to make even this imperfect essay, hoping that possibly one parent might be convinced, or one female saved from injury.

II.

LAWS RESPECTING DISSECTION.

Salem, Sept. 1, 1829.

SIR,—The Massachusetts Medical Society having appointed us a Committee “to consider if any change can be effected in the laws of the Commonwealth, in

* The writer has twice opened the bodies of females who were addicted to excessively tight lacing. In both, the liver, stomach, spleen, diaphragm, lungs and heart were permanently and injuriously displaced. Many of the “*liver complaints*” suffered by fashionable ladies are entirely owing to the same. The following is extracted from a Baltimore paper, and is an illustration in point.

“**SUDDEN DEATH.**—A colored woman, recently from New York, in the employ of Mr. F. M. Diffendesser, of Baltimore, died suddenly on Thursday last, while standing at a table ironing clothes! An inquest was held over the body, during which it was opened by a physician who was called in. It appeared that the deceased had been in the habit of tight lacing to such a degree as to force the liver from its natural seat. The more immediate cause of her death was the rupture of a bloodvessel near the heart.”

relation to human dissection,” we have the honor to solicit your influence and interest to coöperate with us in devising means to advance the welfare of the community, and of our common profession, so deeply involved in the prosecution of Anatomical Science.

It must be obvious to you, Sir, that the difficulties and dangers which now oppose the practical study of Anatomy in this Commonwealth, are such as operate almost to the complete discouragement of the student and practitioner in pursuing this study; and that these difficulties and this discouragement grow out of the popular prejudice, which regards dissection with horror, and blinds the community to a view of the importance of the knowledge which is sought for, and the facility with which this knowledge may be obtained, without any outrage upon the good order or the genuine good feelings of the public. It is to the removal of this popular prejudice, especially as it exists in the minds of the members of our Legislature, that we wish to direct the efforts of the influential members of the Medical Society; and the following are some of the statements on which it is intended to rely, in presenting a petition to the Legislature for a modification of the existing laws:—

1. Anatomical knowledge is absolutely necessary in all branches of our profession. No conscientious man will venture to perform surgical operations without this knowledge; and it is equally necessary, to enable the physician to distinguish the seat of the different internal diseases, and direct the application of remedies.

2. This knowledge can only be

acquired by dissection. For it is manifestly as absurd to expect to learn the intricate structure of the human frame by means of plates and models, as for a mechanic to acquire a practical acquaintance with the structure and movements of a watch, without being allowed to inspect the interior of the mechanism, and to take it in pieces.

3. So far as the poor are concerned, it is for their especial benefit that all physicians should be enabled to learn Anatomy thoroughly, and practise it occasionally during life. Riches may procure medical or surgical skill, at whatever cost, and from any distance; and so long as the rich are willing to pay for this skill at its highest rate, a few individuals will be found who will seek it abroad or at home, at immense expense, or personal sacrifice and risk. But the poor must be dependent for medical and surgical relief on those who are nearest to them; and, generally, not on those who have had the *most* opportunities of acquiring skill in the long-continued practice of their profession.

4. In confirmation of the foregoing argument, the Committee would refer to the observation of any competent member of the profession to say, if there are not among the paupers who are supported at the public charge, many whose diseases and lameness have passed from a curable to an incurable condition, for the lack of that surgical skill which could only have been derived from a knowledge of practical Anatomy. It is not meant to be asserted, that all fractures, dislocations and surgical diseases can be cured, without *some* cases occurring in

which such lameness will unavoidably result, as will occasion inability to labor. But so numerous are these cases now known to be, and so great the amount of loss which the public sustains by the loss of their labor, and the expense of their support, that the interest which the community has in affording the means of lessening the number of these cases, is direct and obvious.

5. All lovers of good order and good morals must feel desirous to prevent amongst us the growth of a body of people, who make it their business to violate the sepulchres of the dead. Late experience in Europe has shown, that the bands of resurrectionists are among the most *hardened* and *desperate* villains in society; and that even *murder* has been resorted to by them. These desperate people are always encouraged by whatever tends to create obstacles to the *lawful* presecution of Anatomy, and will always find *some* means of supplying bodies, while a high price is paid for them by those engaged in anatomical studies. The perfect safety of the sepulchres of the dead may be insured, and the feelings of the living preserved from the least outrage, by a proper selection from among the bodies of the dead.—If the bodies of persons who are unclaimed by the friendship or relationship of a living individual, are devoted, under proper regulations, to anatomical purposes, there will be found in all our large towns an adequate supply of those, whose death no one is left to regret, and to whose remains no one is willing to show respect.

In fine, it is certain that the public, as a body, have a greater

degree of interest in this matter than even physicians ; and it is to be hoped they may be made to view this interest in its true light.

We respectfully request of you, Sir, that you will give us your assistance in promoting the object for which the Committee was appointed ; and especially by laying the subject, with such arguments as we have used, and others which will occur to yourself, before the consideration of those members of the Massachusetts Legislature with whom you are acquainted.

We also request you would forward to the Chairman of the Committee any important views which may occur to you on this subject, and of what appears to you, from your personal knowledge of the course of public opinion in your vicinity, the prospect of success in the anticipated application to the General Court.

If you should have anything to communicate, please to forward it previous to the 1st of October.

We are your obedient servants,

A. L. PEIRSON,
WILLIAM INGALLS,
JOHN C. WARREN,
GEO. C. SHATTUCK,
JOHN BROOKS,
JOHN D. WELLS,
JOHN WARE.

III.

ACUPUNCTURATION.

The following account of this remedy, the rage for which has never yet crossed the Atlantic to this new world, is from the spirited pen of Dr. Johnson, who has probably assigned it just the place that it merits.

In nothing is fashion, omnipotent fashion, more conspicuous than in medicine. A little while ago the town rang with "acupuncture;" every body talked of it ; every one was curing incurable diseases with it ; but now not a syllable is said on the subject, and acupuncture would seem to be quietly consigned to "Lethe's silent stream." In France, however, the advocates of the measure would seem to be as hot as ever, and cases are constantly recorded of the wonderful benefits and cures it has accomplished. In the Archives Générales for last October, two cases are reported from the practice of M. Trouve, where it *seemed* (for alas! in these matters we are frequently sadly taken in) to produce good effects. The first was that of a young woman laboring under many of those strange hysterical symptoms so commonly met with in practice, and that to a very distressing degree. A great variety of general and local means were put in practice with little or no effect, when M. le Médecin en chef resorted to the needles, and employed them assiduously for many days, as often as the slightest premonitory symptom of a hysterical paroxysm made its appearance. The patient soon left the hospital cured. The second patient was also a young woman, who had suffered for seven years from paralysis of the right lower limb following a fall upon the back, and obliging her to go constantly on crutches. Four applications of the needles sufficed to give her perfect use of the long palsied limb, and shortly afterwards this patient also left the hospital.

We suppose the *modus operandi* of acupuncture, at least in

cases of this description, is to be considered similar to that of incantations, cauls, &c., for it is notorious that many a malady has yielded to the potent spell of some old beldame, which had long resisted the professional skill of the regular descendents of Hippocrates. Whatever the *mode* in which the needles act may be, if they *have* an action, and that a good one, they are worth a trial now and then in those nervous or hysterical disorders, on which scientific measures are completely thrown away. We have seen a most salutary salivation produced by *bread pills*, in a very hypochondriacal patient, who fancied he had syphilis, and that he *ought* to be put under the influence of mercury. The pills of course were said to be mercurial, and particular injunctions were given him to leave them off as soon as the mouth should be affected.

IV.

OPIMUM EATERS.

From Mr. Madden's Travels in Turkey.

I HAD heard so many contradictory reports of the sensations produced by this drug, that I resolved to know the truth, and accordingly took my seat in the coffee-house, with half a dozen *Theriacs*. Their gestures were frightful: those who were completely under the influence of the opium talked incoherently; their features were flushed, their eyes had an unnatural brilliancy, and the general expression of their countenance was horribly wild. The effect is usually produced in two hours, and lasts four or five: the dose varies from three grains

to a drachm. I saw one old man take four pills, of six grains each, in the course of two hours: I was told he had been using opium for five-and-twenty years; but this is a very rare example of an opium eater passing thirty years of age, if he commence the practice early. The debility, both moral and physical, attendant on its excitement, is terrible: the appetite is soon destroyed, every fibre in the body trembles, the nerves of the neck become affected, and the muscles get rigid. Several of these I have seen in this place, at various times, who had wry necks and contracted fingers; but still they cannot abandon the custom: they are miserable till the hour arrives for taking their daily dose; and when its delightful influence begins, they are all fire and animation. Some of them compose excellent verses, and others address the bystanders in the most eloquent discourses, imagining themselves to be emperors, and to have all the harems in the world at their command.

After trying the experiment on himself, Mr. M. gives the following history of his sensations:—

My faculties appeared enlarged: every thing I looked at seemed increased in volume; I had no longer the same pleasure when I closed my eyes which I had when they were open; it appeared to me as if it was only external objects which were acted on by the imagination, and magnified into images of pleasure; in short, it was “the faint exquisite music of a dream” in a waking moment. I made my way home as fast as possible, dreading, at every step, that I should commit some extravagance. In walking, I was hard-

ly sensible of my feet touching the ground ; it seemed as if I slid along the street, impelled by some invisible agent, and that my blood was composed of some ethereal fluid, which rendered my body lighter than air. I got to bed the moment I reached home. The most extraordinary visions of delight filled my brain all night. In the morning I rose, pale and dispirited ; my head ached ; my body was so debilitated that I was obliged to remain on the sofa all the day, dearly paying for my first essay at opium eating.

**SKETCHES
OF**

PERIODICAL LITERATURE.

SOMETHING NEW RESPECTING CREPITATION OF THE LUNGS.

A M. PIEDAGNEL has undertaken to prove that crepitation of the lungs, so far from being a proof of their healthy state, is always an indication of disease. He has ascertained that where death has occurred without laborious breathing or any injury to the lungs, these organs do not crepitate on pressure. When this phenomenon is found, therefore, it is to be attributed to a partial emphysema, that is, to a rupture of the air-cells, and the escape of the air into the common cellular substance. This may be produced, as he thinks, by the struggle for breath which occurs in many instances before death. After inspiration, the glottis is contracted spasmodically, and the expiratory action of the muscles, under these circumstances, is sufficient to cause rupture. It may also be occasioned by forcible inflation of the

lungs, as in the attempt to produce respiration by this means in stillborn children. In one instance where this attempt was made without success, considerable emphysema was, on examination, found in the lungs, and the inference was, that the emphysema had been caused by the inflation. Some experiments, subsequently made on living animals, tended to confirm this conclusion. Inflation produced embarrassed respiration, and shortly after, death ; and in the dead body the lungs were found pale and emphysematous.

SURGERY OF GALEN.

In the course of some observations on the degree of sensibility possessed by the heart, Dr. J. R. Coxe cites a case from Galen which proves this medical patriarch possessed more anatomical knowledge and skill in surgery than is generally supposed. A boy had received a blow on the sternum. This being neglected, led to an abscess on the part, which was opened and seemed to heal. Matter formed however a second time, and was again evacuated ; but the wound thus made continued open, notwithstanding every effort made to heal it. "On this account," says Galen, "a consultation was called, at which I was present. The sternum was so much affected by caries that the motion of the heart could be seen through it on the left side. No one however dared to propose the removal of the diseased portion ; because it was thought to involve a perforation of the thorax. Notwithstanding this danger, I undertook to perform the operation ; but stipulated that as the

extent of disease in the parts subjacent to the bone could not be judged of, I would not answer for its effecting a cure. On denuding the bone, the extent of disease was found to be nearly such as had been observed externally; the margins, beneath which were the veins and arteries, being healthy,—a circumstance which enabled me to operate with great confidence. Having removed the part affected, I found that the pericardium was involved in the disease, and that the heart was laid bare. This caused me some apprehension at first; but in the course of a short time the patient was restored to health; an event which could not have been hoped, had no one been willing to operate, and the operation itself could not have been performed, except by one versed in the science of anatomy."

CHOREA—WITH DISSECTION.

AN interesting case of chorea has occurred at the Sunderland Dispensary. The subject of it was a girl 16 years of age. The disease affected the left side of the body. She grew worse, convulsions came on, and she died. On dissection, a calcareous concretion was found in the medullary substance of the left hemisphere of the brain. This stone was of an irregularly cubical figure, each of its sides measuring about an inch. The medical gentleman who reports the case states that he has seen two others in which partial passed into general convulsions, followed by coma and death. In neither of these was there opportunity for post mortem examination of the brain. From the great similarity of the symptoms to those of the present case,

he judged that they, and indeed most other analogous cases, arise more frequently from direct irritation of the brain, with increased afflux of the blood hither, than from sympathetic excitement of that organ.

It will be recollected that the concretion above alluded to occurred in the same side of the body as the convulsive movements it occasioned.

SMALLPOX IN PENNSYLVANIA.

IN the last No. of the American Journal, we see the account of an epidemic smallpox which occurred in Pittsburgh, Pa. toward the close of the year 1828, and continued for six months. A few of the facts are interesting, as they bear on the point of the prophylactic power of vaccination. One individual is mentioned, whose case was known to the reporter. He had been vaccinated twelve years before, and retained the mark of the genuine vaccine vesicle; yet he went regularly through the smallpox, though in a mild form. Several other instances are mentioned, where persons who had gone through the vaccine disease were greatly exposed, but escaped the infection.

CATARRHUS VESICÆ.

THIS disease, so common with old people in the higher ranks of society, has been particularly attended to of late by M. Civiale. He is of opinion that it is a chronic inflammation and thickening of the coats of the bladder, occasioned by diminished tone in its muscular structure. A direct consequence of such diminution is an imperfect emptying of the sac. The remaining urine produces irrita-

tion, and this passes into chronic inflammation. He relies on the catheter for a remedy.

BOSTON, TUESDAY, SEPT. 22, 1839.

We conclude to-day our extract from the recently published work of Dr. Godman, of Philadelphia. This extract comprises the whole of his treatise on Tight Lacing, with the exception of his description of the parts concerned in the process of respiration,—a portion which seemed unnecessary for medical readers. Some account of this work we propose to give in our next.

LAWS RESPECTING DISSECTION.

We have given in this number a copy of the Circular of the Committee of the Massachusetts Medical Society, to whom was referred, at their last meeting, the subject of Dissection. This Circular has been forwarded to members of the Society, and we would call their earnest, immediate, and devout attention to the propositions it contains. The subject of this Circular is of incalculable weight; it is the key-stone of the arch on which all medical and surgical science rests; its importance is measured only by the practical value our profession is capable of acquiring, and the blessings it is capable of extending to mankind. Give up dissection, and the beautiful and stupendous fabric which the learning and labors of medical men, in all past ages, have been spent in rearing, must inevitably fall; the fountains of the healing art will become dry, and the learned and ju-

dicious physician, the skilful and accomplished surgeon, will be lost in the impostor charlatan.

The time is arrived when it is necessary for the profession to take some active measures to facilitate dissection in this country. Every member of the faculty ought to feel that to move or be quiet in this matter is not left at his option; a duty,—a high and commanding duty,—urges him to spend his time and talents, to use the utmost of his influence, in correcting the popular error on this subject, and convincing the people,—the true rulers of the land,—that every obstacle the law opposes to dissection, is a stepping-stone to the very evil it would avert. So long as no subjects are specially allowed by law for purposes of anatomy, violation of the grave will be indiscriminate. Just in proportion as these obstacles are increased, the price offered for subjects will be enhanced, and the temptation increased to procure them at the sacrifice of every feeling of the heart,—to procure them, if by no other means, by those horrible deeds which have immortalized the great city of the North in the annals of crime.

This is not a fanciful picture. The effect of legal restraints on the means for dissection in Scotland, have passed through all these stages to the last,—the climax has there been surmounted. In this country, it has made an alarming progress; the sanctuary of the dead is often violated, without regard to the number or character of the friends who followed the corps to its supposed resting-place: and nothing can be more cer-

tain than the fact, that the closer we shut the grave against the resurrectionist, the sooner will he find his prey elsewhere ;—debarred from the depositories of the dead, he will seek it in the retired dwellings of the living ; shut out from sacrilege, he will fly to murder.

It is very evident that by devoting to the purposes of anatomy the bodies of those who die in houses of correction, the current of events which is drawing near to the shocking catastrophe to which we have alluded, may be effectually checked. Such regulation would moreover be a strong motive with the vicious to restrain their evil passions, and thus act with a double power in promoting the good order, good morals, personal security and happiness of the people.

The last session of the British Parliament was rendered one of the most memorable in the history of the nation by the emancipation of the Catholics. It would have crowned the glory of that Parliament, had they exercised as enlightened a policy toward the Surgeons. Mr. PEEL exercised his energies successfully in satisfying the just claims of the former, without injury to church or state ; but Mr. WARBURTON could not effect the emancipation of the Surgeons from the severer thralldom in which they are held by the laws of the land.—The Catholics were not eligible to office ;—the surgeons are the only persons eligible to certain offices, and yet subjected to heavy penalties if they discharge ably and faithfully the duties which those offices impose on them ; for no man

can, in the nature of things, discharge either ably or faithfully the duties of a surgeon, without such a knowledge of the minute structure of the part on which he operates, as dissection alone can give him. If a surgeon operate *badly*, an action will lie against him for malpractice, and he loses his professional reputation ;—if he takes the only possible measure to enable him to operate *well*, the laws of his country meet him with greater severity, and the popular voice is still louder against him.

Let us hope that the proud distinction of leading the way to a more enlightened policy respecting dissection, remains for this country.—If this is to be effected at all, it must be done by the individual efforts of medical men. Great and salutary changes in our laws must originate in the people, and any attempt to effect them in the legislative hall, before the minds of the people are convinced of their necessity or expediency, will be inevitably abortive ; it is working against a current which can never be stemmed. It is not the water poured on the branches of the oak which gives it verdure and vigor ; it is the moisture taken in drop by drop at its roots, and the influence, however small, which is exerted at the extremity of its minute tendrils, is that alone which can produce any great changes in its more conspicuous part. Let every member of the profession be fully apprized of the importance of his own private personal influence, and let him exert it never so quietly, but with judgment and power, and the great result will astonish him.

HEALTH OF OUR CITIES.

THE Yellow Fever continues to prevail to an alarming, and, we believe, unprecedented extent, at New Orleans. From thirty to forty are said, by good authority, to die daily of this disease, and very few attacked by it recover. Its ravages have been particularly great among those Spanish Refugees who, driven from their homes by an arbitrary decree of the Mexican Government, sought a refuge where so many of them have found a grave.

At Savannah but three cases of Yellow Fever have occurred, and the city is esteemed unusually healthy.

Charleston has escaped this scourge thus far. The Carolinians complain more of injured cotton crops than the ravages of disease. The subsidence of the recent freshet in the Pee Dee, will leave pools of water scattered over a large tract of country, which, becoming stagnant and subjected to the heat of a southern sun, must produce fever in great abundance. The only safety of the river inhabitants will be the continuance of the rains into October.

We have no reports of the existence of any malignant or other prevalent disease in Baltimore, Philadelphia, or New York.

The Dysentery is unusually rife on the banks of the Susquehanna, and its vicinity; whole families are confined at once to their beds, but the mortality is as yet inconsiderable.

Our autumnal fever, of which there is more or less in this city every fall, is more frequently met with this season than usual. Although the cases are numerous and recovery generally

slow, it proves fatal but seldom, as may be seen by our bills of mortality. A good practical treatise on this disease is much wanted, and it is to be hoped the Prize offered by the Boylston Committee for the best essay on the subject, will be the means of supplying this deficiency in our medical literature. For the terms on which this Prize is offered, our readers are referred to No. 27, Vol. 2d, of this Journal.

MEDICAL MANUFACTORIES.

THESE establishments appear to be uninterrupted in their operations by the pressure of the times. Within three or four weeks, 42 medical Doctors have been finished off at Bowdoin College, 10 at Williams College, 35 at Yale College, and many others which we have not time to enumerate.

Several new laborers have been also engaged, viz.—At Bowdoin College, JAMES MCKEAN, M.D., of Topsham, as Professor of Obstetrics, and JOHN DE LAMATER, M.D., of Fairfield, N.Y., as Professor of the Theory and Practice of Physic.—At Burlington College, BENJAMIN LINCOLN, M.D., of this city, as Professor of Anatomy and Surgery.

These gentlemen, with their Collaborators and others, will commence operations at their respective Institutions as follows:—

At Bowdoin College, about the end of January or the beginning of February. By a very happy arrangement, the lectures commence at this seminary about the time they end elsewhere; so that pupils who desire

it can avail themselves, in a single season, of the advantages of two schools.

At the Boston Medical College of Harvard University, on the third Wednesday in October.

At Rutgers Medical College, New York, on the first Monday in November.

At the University of Pennsylvania, on the first Monday in November.

At the University of Maryland, on the last Monday in October.

At the Medical Department of Washington College, on the first Monday in November.

At the Berkshire Medical Institution, the Lectures commenced on the first Thursday of this month.

At the late Commencement at Yale College, the Honorary Degree of M.D. was conferred on Drs. Nathaniel S. Perkins, Bela Farnum, Luther Ticknor, and Darius Hutchins.

We do not learn that any other of our literary institutions found any medical gentlemen within the sphere of their knowledge worthy of similar honors.

TRANSATLANTIC QUACKERY.

WE know not if our readers have heard or not of a famous worker of wonders, who is making a great parade in London, and imposing most egregiously on the credulity of John Bull. The thing we refer to is called by a very long name; to wit, *Mr. LONG SAINT JOHN LONG,—ARTIST.* Now the art which this man is exalting by the workings of his transcendent genius, is no less than the *art of healing*;—the art of healing not only diseases which others have healed before him, but that triumphant ene-

my of the faculty, *pulmonary consumption.* Various newspapers in the British metropolis blazon forth the unprecedented cures performed by this *rara avis*, and extol beyond measure his method of treatment, which, by the way, is a profound secret. One young gentleman, whilst under the treatment of Long St. John for "confirmed consumption," was recently seized with enteritis, and died in four days. On inspecting his body after death, "the lungs were found perfectly sound, and no trace of tubercles, or other phenomena of phthisis, existed in the chest."! Had not the melancholy event occurred which terminated the career of this patient whilst in the midst of St. John Long's treatment, how glorious a case would this have been to have published to the world! A case of "confirmed consumption" wholly and permanently cured by the wonderful skill of Mr. St. John Long, the healing Artist.—Another remarkable case, in which the cure was attested by a Master of Arts and Doctor in Divinity, is thus noticed by Dr. Johnson in his Medical Journal:

By the post of this morning (June 15th) we received two newspapers, Bell's Weekly Messenger, and the Leeds Mercury. In the former was printed very conspicuously the letter with its testimonials (No. F). In the latter (Leeds Mercury) a single line dispelled the fair illusion of hope on one hand, and unprincipled mendacity on the other! Mr. St. John Long and his puffers require some strong opiates to make them sleep with easy consciences.

(1.)

London, August 17, 1828.

My dear Sir,—For seven years

previous to placing myself under your care, I suffered great general debility, with violent cough, and expectoration, and was dreadfully emaciated. I was also afflicted with spitting of blood, pains in the chest and side, extreme difficulty in breathing, could not lie down in bed without a chair for my support, and despairing of recovery. Now, my flesh has become firm and healthy, I have appetite, can sleep, and walk five or six miles without much fatigue.

MARTHA HUDSON.

Hipperholm, Halifax, Yorkshire.
Feb. 16, 1829.

It is some months since I left your care, and I have gone on progressively gaining health, having stood the severity of the winter months astonishingly well, though a cough still remains. The full history of my case is recorded in your book, which bears testimony of the merits of your important discovery.

Gratefully yours,

MARTHA HUDSON.

We, whose names are under-written, with pleasure attest the truth of the above statement :—

RICHARD HUDSON, M.A.

Father of Martha Hudson.

RICHARD HARTLEY, D.D.

Brother in-law of Martha Hudson.

(2.)

DIED—On Saturday last, at Hipperholm, Martha, the second daughter of the Rev. Richard Hudson.

But Mr. St. John Long seems to be a man of uncommon kindness of heart, as well as medical skill, as evinced in the following history recorded in another English periodical.

A young lady, subject to cough, came to London, to place herself under the care of this pretended curer of consumption of the lungs, under the impression that he was an *eminent* physician. The patient attended regularly, and agreed, by a solemn promise, not to reveal his mode of treatment. The humane and liberal-

minded John St. John Long felt so much interested in her case, that he, good soul, agreed to receive her on a Sunday; and such was his desire to be accommodating, that he even condescended to take the fee on the sabbath day.

STATISTICS OF DENTISTRY IN FRANCE.

The following is a translation from a late French publication ("Sur l'art du Dentiste") recently received from Paris by Dr. Parsons, Dentist, of this city :—

The business of the Dentist has been so much increased within thirty years in France, that when it is considered in its mechanical part, and as comprehending, also, all which relates to the treatment of diseases of the mouth, it produces an annual income of nearly six millions of francs.

At no period have all the departments of France united contained twice the number of dentists that practise in Paris; for it will be understood that we call none dentists but those who practise solely in that branch of surgery which relates to the diseases of the mouth; for if we shall give this name to all who only extract teeth, we should find at least one in every little village.

In the year 1790, there were only five dentists in Paris; in 1814, there were twenty; and in 1828, about a hundred and forty. We may place these hundred and forty dentists in ten classes, according to their annual receipts, as in the following table :—

Class.	Number in the Class.	Ann. inc.	Whole amount received by all of this Class.
1	5	40,000 fr.	200,000 fr.
2	6	30,000	180,000
3	6	25,000	150,000
4	8	20,000	160,000
5	8	15,000	120,000
6	12	12,000	144,000
7	15	9,000	135,000
8	20	6,000	120,000
9	25	4,000	100,000
10	35	2,000	70,000

Total 140 who rec. annually 1,579,000 fr.

We may number in the Departments about two hundred dentists, who receive annually, one with another, about 5000 francs each. This would give a total of one million of francs, which added to the income of the dentists in Paris, is 2,379,000. The apothecaries, perfumers and others in Paris and in all other parts of France receive from the sale of powders, elixirs, opiates, and other articles used for the mouth, an amount equal at least to that of the dentists of Paris and of the departments together,—to wit, 2,379,000 francs.

Now if we admit that among thirty millions of inhabitants in France, there are fifteen hundred thousand who attend to the preservation of their teeth, and who use only one tooth-brush a year at 75 centimes, we shall have a new total of 1,125,000 francs.

In bringing together these different products, we find that—

The annual receipts of the dentists in Paris are	1,379,000 fr.
———— of the dentists in the Departments	1,000,000
	<hr/> 2,379,000
———— of the apothecaries, perfumers, &c., in France	2,379,000
———— of the sellers of tooth brushes	1,125,000
	<hr/>
Total	5,883,000 fr.

But granting that of this sum there is paid 630,000 francs for indispensable operations, such as the extraction of teeth and other services which properly come within the province of surgery, it results that the business of the dentist, considered in its mechanical part, occasions an annual expense which, at the lowest estimate, we must value at 5,253,000 francs. This result may surprise many, but we engage that it is as exact as it is possible calculations of this kind can be, in which we cannot, of course, avail ourselves of mathematical accuracy.—*Daily Adv.*

Aboriginal Skeletons.—Several skeletons of the aboriginal inhabitants were recently found at South Salem in this state, whilst the workmen in a manufacturing establishment were levelling the yard. They were buried but about two feet below the surface and in a state of preservation remarkably good, since more than 200 yrs. must have passed over them. These skeletons were found arranged in groups, two or three together, and lying on the side, with their faces turned to the east,—ready to greet the rising sun on the morning of the resurrection. Most of the bodies were adults, but three are said to have been children. It is supposed by the peculiar situation of the groups of skeletons, that those who make up each group must have been buried at the same time;—perhaps in the year 1617 when the plague raged with such mortality among the aboriginal inhabitants of that place.

Roots and Herbs.—One of the Steam and Herb fraternity, who calls himself Hiram Burnet, apologises in the newspapers for deviating from the “Thompsonian Practice:” it seems that this deviation caused his expulsion from the Root and Herb Steepery, and deprived him of his patient. The Delaware Gazette says, “The unfortunate sick man was taken from Dr. B. by some of his brother practitioners, and done for so that he died by steam in a reasonable time.”

Deaf and Dumb.—Mr. Gallaudet, principal of the Asylum for Deaf and Dumb, at Hartford, advertises that in consequence of arrangements made with Massachusetts and Maine, a new class will enter on the 28th of October next.

REPORT OF DEATHS IN BOSTON,

The week ending Sept. 18, at noon.

Of accident, 1—cholera, 1—consumption, 3—complaint of the heart, 1—dysentery, 3—drown, 1—dropsy in the head, 1—inflammation in the bowels, 1—infantile, 2—liver complaint, 3—measles, 3—mortification in the bowels, 1—old age, 1—typhus fever, 1—unknown, 2. Males, 15,—females, 10. Total, 25.

ADVERTISEMENTS.

MEDICAL INSTRUCTION.

THE subscribers continue to receive and instruct Medical Pupils upon the terms formerly announced.

The Pupils are admitted to the medical and surgical Practice of the Massachusetts General Hospital, and receive private instruction from the subscribers.

JAMES JACKSON,
WALTER CHANNING.

For terms, apply to Dr. Channing, Tremont street, opposite Tremont House.

Sept. 22.

3t.

CARTER & HENDEE have just published,—*The Constitution of Man, considered in Relation to External Objects.* By GEORGE COMBE.

From the Preface to the American edition.

"Mr. Combe's work should be placed with those, of which so many within a few years have appeared, which are devoted to the all-absorbing topic of Education. It treats of moral, intellectual, and physical education. This is not formally done under so many distinct heads. But the whole course of reasoning of the author, and the whole array of all his illustrations, have it always obviously in view to show how the highest cultivation of each of these may be most surely brought about.

"The publishers have printed this edition from a belief that there is much in the work to interest the community.

"It has a novelty to reward the general inquirer, and it presents the well known under novel aspects. There is one class amongst us who may study it with much advantage. Scholars are referred to, a class here too small to form a distinct order with habits of their own, and who insensibly fall into those which, although not mischievous, to the multitude on the score of health, too often make ill health the portion of the sedentary student, and bring upon him premature decay.—To all classes it is recommended, and the various learning and acuteness of the author well fit him to write a book which addresses its instructions to the whole community."

Sept. 8.

CONSOLIDATED COPAIVA.

COPAIVA may be given in this form without the least inconvenience. Neither communicating taste, nor impart-

ing odor to the breath, it is also retained without the least disquietude or uneasiness to the stomach; and I am informed by Dr. Rousseau, that in large doses it does not purge."—*Phil. Journal of Med. Sciences.*

See an article in this Journal, Aug. 18th.

OIL OF BLACK PEPPER.

This is a much more active preparation of Piperine. One drop is fully equal to six grains of the latter. It is a valuable adjunct to Quinine. One or two drops, added to six grains, will greatly increase the efficacy of that medicine.

For sale by NATHAN JARVIS, 188 Washington Street, where Physicians will find medicines at as reasonable terms as at any place in Boston.

Aug. 25.

eoctf.

BERKSHIRE MEDICAL INSTITUTION.

THE Annual Course of LECTURES will commence on the first Thursday in September, and continue fifteen weeks.

Theory and Practice of Physic by H. H. CHILDS, M.D.

Anatomy and Physiology, J. D. WELLS, M.D.

Medical Jurisprudence, S. W. WILLIAMS, M.D.

Theoretical and Operative Surgery, S. WHITE, M.D. and S. P. WHITE, M.D.

Materia Medica, Pharmacy and Obstetrics, C. B. COVENTRY, M.D.

Chemistry, Botany, Mineralogy and Natural Philosophy, C. DEWEY, M.D.

Matriculation ticket, \$ 3. Fee for Lectures, \$ 40. Library ticket, \$ 1. Graduation, \$ 15.50. Board, including washing, lodging and room, \$ 1.75 a week.

Pittsfield, July 22, 1829. aug4tsep30

MEMOIR OF DR. HOLYOKE.

JUST published, and for sale by CARTER & HENDEE,—A Memoir of EDWARD A. HOLYOKE, M.D. LL.D., prepared in compliance with a vote of the Essex South District Medical Society.

Carter & Hendee have just received the American Journal of the Medical Sciences, No 8, August, 1829.—C. & H. receive subscriptions for this valuable work, and can supply the numbers from its commencement.

Aug. 18.

Published weekly, by JOHN CORREY, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

THE BOSTON
MEDICAL AND SURGICAL JOURNAL.

Vol. II.]

TUESDAY, SEPTEMBER 29, 1829.

[No. 33.]

I.

HAY ASTHMA.

Observations on the Nature, Cause and Treatment of Hay Asthma.

By WILLIAM GORDON, Surgeon, Member of the Royal College of Surgeons, Edinburgh, &c. &c. &c.

THE variety of asthma which forms the subject of the present memoir, has scarcely, if at all, been glanced at by any systematic writer on the practice of medicine. We are furnished with various instances of dyspnœa, and other pulmonary affections, being produced by the inhalation of the effluvia arising from certain odoriferous and other substances, examples of which I myself have witnessed; but the catarrhal and asthmatic symptoms, occurring in particular individuals during the ripening of grass, and evidently caused by the smell given off from its flowers, have been but slightly noticed; and by some practitioners their existence is considered very questionable, if it be not altogether denied. There can be no doubt, however, that the complaint which is termed (though perhaps not very correctly) "hay asthma," does really exist; and although occasionally mild in its nature, yet for the most part it assumes a very formidable character, as will appear from the following history of it, which is taken from some well-marked cases that have fallen under my observation.

The disease first commences with a slight sensation of chilliness, accompanied with thirst, lassitude, drowsiness, and other indications of fever; at the same time the Schneiderian membrane becomes dry and irritable, and the patient is affected with an almost incessant sneezing, and an inexpressible itching or pricking in the fauces and trachea, and along the external auditory passage: the head is occasionally vertiginous or painful, but more generally it feels heavy or indescribably uncomfortable. These symptoms are soon succeeded by inflammation of the tunica conjunctiva, which comes on very suddenly, and after remaining for an uncertain length of time, vanishes as suddenly as it made its appearance.

After the lapse of two or three days, though sometimes much earlier, a tightness is felt about the chest, and the respiration begins to be obstructed, especially in the evenings, and is then always attended with a wheezing noise. This obstruction at first is but very trifling, and occasions little or no inconvenience; but it daily becomes more and more oppressive, and at length arrives at the very acme of severity. At this crisis a dreadful sense of suffocation comes on, together with an intolerable weight at the lower part of the sternum, and a deep, hard, dry, frequent cough, which tends very much to aggravate the difficulty of breath-

ing. The condition of the patient is now most distressing,—he cannot for a moment remain in the horizontal position; he gasps for breath; his eyes protrude; his face and lips are of a deep purple color; he throws open the doors and windows; rushes from one room to another in quest of a refreshing current of air; but, unable to find relief, he sinks down exhausted or half insensible. From this state he is roused by stimulants, or he gradually recovers by himself; but probably only to undergo a repetition of his sufferings. These symptoms, which usually make their attack about seven in the evening, but not unfrequently long before this period, continue five or six hours; they then begin to subside, and as the morning approaches, the patient falls into a short but restless slumber, from which he awakes with a sense of great debility, and a feeling of constriction across the chest.

Although there commonly takes place towards morning a considerable remission of the asthmatic fit, yet the symptoms never quite go off, but remain throughout the night and following day, and in the evening assume their accustomed severity. During the paroxysms the pulse is weak and irregular, and ranges between 85 and 100; the tongue is white, and the urine is high-colored, and discharged in small quantities.

The paroxysms do not always present themselves in so violent a form as I have now described; the patient sometimes experiences nothing of that overwhelming dread of suffocation which I have mentioned above, and in some instances the attack is so remarkably mild, that he is affected with only sneezing, headach, and inflammation of the conjunctive and Schneiderian membranes.

The cough is never attended with any expectoration, and very often it does not come on till the other symptoms have in a great measure abated. In the latter case it is never so frequent nor distressing as when it appears in the earlier stages of the disease.

Hay asthma seems to be peculiar to youth and middle age, and is never observed in the later periods of life.

Many examples, as I before intimated, have been recorded of great distress and disorder of the respiratory organs being occasioned by the odor exhaled from aromatic or pungent bodies; and there can be no doubt that the cause of the singular complaint which I have endeavored to describe, is the aroma emitted from the flowers of grass, particularly from those of the *anthoxanthum odoratum*, or sweet-scented vernal grass. If the patient remain closely shut up in a house, even although this be situated in the midst of the richest grass, he suffers considerably less than if he walk abroad into the fields; and if he remove from the country to the centre of a large town, or go out to sea, he is never at all affected; but the moment he comes into, or approaches a meadow, he immediately begins to sneeze, and returns home with inflamed eyes, wheezing, and difficult respiration. I have known a patient wander about his flower garden for several hours, or ride through corn fields or plantations, and yet not experience one disagreeable sensation; but as soon as he arrived at the vicinity of a meadow, the sneezing and ophthalmia have instantly appeared. I have said that the *anthoxanthum odoratum* seemed to be the principal exciting cause of hay asthma, and I am induced to come to this conclusion—first, because

this plant is one of the most strong scented of the grasses ; and, secondly, because as soon as it begins to flower, and *not till then*, the asthma commences ; as the flowers arrive at perfection, the disease increases ; and after they have died away, I have remarked that patients could pass through the most luxuriant meadow with total impunity. The disease then should rather be denominated grass asthma than hay asthma, since hay seems incapable of producing it. This asthma appears, from the scanty excretion of mucus from the lungs which attends it, to consist chiefly in a spasmodic constriction of the bronchial vessels, and of the muscles concerned in respiration.

It will be evident, that residing in a large town, or a voyage at sea, during the season in which the flowers of grass, and especially of the anthoxanthum odoratum, are in bloom, and in a state of their greatest vigor, will prevent the accession of hay asthma. But these remedies are not always convenient, nor feasible. It therefore becomes necessary to invent some other means of administering relief, and such as may be at the command of every one. I shall, therefore, give an account of what measures I have adopted, and have found most successful, not only in mitigating or removing the paroxysms when present, but in warding off their attack altogether.

[The Treatment, in our next.]

II.

ON A DISEASE OF THE TYMPANUM.

By JOSEPH SWAN, Esq.

IN tracing the tympanine branch of the glosso-pharyngeus nerve, which has been so particularly de-

scribed by Jacobson, much of its distribution may be seen on the transparent membrane lining the tympanum when this part is perfectly sound, but when it is diseased a very considerable difficulty is experienced. In an attempt to trace this nerve in the head of an old woman, the membrane lining the tympanum was not only thickened, but there was at the same time some roughness of the bone. In the head of a man, who had a suppurating node on the forehead, and whose posterior nostrils were stopped up by adhesions of the soft palate, this membrane was also thickened ; the spheno-palatine ganglion was very considerably enlarged. In the dissection of the head of a very young woman the schneiderian membrane, covering the inferior turbinated bone of the left nostril, adhered very considerably to that of the septum, so that a very little passage was left for the air ; there was a perforation in the membrana tympani of the same side, and purulent matter was contained in each tympanum. The membrane lining the tympanum was so much thickened that the nerves could not be observed.

I believe deafness does not so often depend on a disease of the portio mollis as has been supposed, but much more frequently on an inflammatory action attacking the membrane lining the tympanum, and involving these small branches of the tympanine nerve. There are very few deaf people who cannot hear music or singing, or who cannot hear conversation, whilst they are in a carriage in motion. But it is not so with those who are nearly blind, for when the optic nerve is paralysed, no light, nor any modification of it

can produce perfect sight, and it must be the same with the auditory nerves with respect to sound. I will not deny that a very strong light may enable a person who has a slight degree of vision to see some objects almost in the same manner as a very deaf person hears with a speaking trumpet. I believe, therefore, that deafness depends very frequently on the inflammatory action having impaired these minute branches of the glosso-pharyngeus nerve, which are distributed on the tympanum; and although many of the noises may depend on the disordered functions of the portio mollis, I nevertheless think they may arise, too, from these small branches of the glosso-pharyngeus, and their communication with the grand sympathetic in the carotic canal. It may be asked how music, &c. dispose the ear for receiving the fainter sounds, as those of the voice. I conceive these excite the parts about the tympanum in the same way that stimulating things would any other organ; and that by this excitement such a degree of action is imparted to the whole as is present in a healthy state of the organ. When the functions of the gustatory nerves are impaired, people cannot taste properly; but when these have been stimulated with a little wine, the taste again becomes exquisite. This may not be thought a fair argument; but I conceive the wine becomes a local stimulus, although it may, at the same time, be a general one, and by both means effect the same purpose.

The consideration of the distribution of the tympanine branch of the glosso-pharyngeus, leads to the conclusion that the tympanum performs more important functions in

the production of hearing than have been usually ascribed to it; and that the failure of remedies in cases of deafness, which have been termed nervous, may have proceeded very much not only from the obscure situation of the tympanum, but from the misapplication of the remedies themselves. And I conceive; therefore, as a thickening of the membrane lining the tympanum, and involving such delicate nerves, can be so often observed, that many of the diseases of the ear may be more within the reach of art than has been contemplated; and that by subduing the inflammatory action at its very onset, before the structure of the delicate parts has become so much changed as permanently to impair their functions, many of the worst cases might be prevented.

Medical Gazette.

III.

LIVING MONSTERS.

Observations on a Human Monster belonging to a new Genus.

M. GÉOFFROY ST. HILAIRE, in May 1829, read to the French Academy of Sciences a memoir on a new production of the human species, struck with monstrosity in the fourth month of intra-uterine life, and on the occurrence of circumstances which produced the monstrosity, by disturbing a formation, which until that period was regular. On the 26th April last, was born, in the Rue du Faubourg St. Martin, of a woman aged 24 years, who had no children previously, a child of regular period, and of large size. On measuring it, from the projection of its eyes, its length was found to

be twenty inches. The upper region of the cranium was wanting. The woman had been attended by Madame Fremaux, midwife, and Dr. Brion, both residing in the same street. The latter has drawn up a notice, in which he has described the defects of the conformation which the child presented. M. St. Hilaire remarked, that it is to him, therefore, that the observation in question belongs. At a meeting of anatomists called by Dr. Brion, one of the medical men present made the most singular assertions as to the causes of the monstrosity. "The monster has large eyes," said he, "which is because the mother had her view constantly fixed on large eyes which she singularly loved. It has long and pointed ears, because the imprudent mother had her caressing hands continually upon the long ears of her dog." M. Geoffroy St. Hilaire mentioned this fact for the purpose of ridiculing the explanations which some medical men still give of cases of monstrosity. After enumerating the different kinds to which the monster in question may be referred, he showed that it comes nearest to the *Thlipsencephali*. Now, in this monstrosity, the fœtus going on in a regular manner until about the fourth month, only deviates at a later period, and under the influence of some violent cause, from the normal organization. Confiding in his previous researches, he did not hesitate to declare, that the mother of the new and very singular *thlipsencephalus* which was before him, had been rudely struck about the third or fourth month of gestation, and even added that it was probably by a violent kick. This explana-

tion was utterly rejected by the medical man who had proposed the singular one mentioned above. On questioning the woman, it was in fact discovered, that, at the period of 'four months' gestation, she had actually been struck and severely wounded by a violent kick, which hit upon the right side of the uterine region. Dr. Brion's inquiries led him to the following results:—

Conception took place on the 19th June, 1828; lesion produced by wound, 17th November, 1828; birth accomplished on the 26th April, 1829; total duration of gestation, 282 days.

Until the period when she was struck, that is to say, during the first four months of gestation (112 days), the mother enjoyed excellent health; but from the 17th November to the period of delivery (during the next five months) she did not cease to experience in the lower abdomen, and in the whole pelvic region, pains more or less acute, which she attributed to the brutality of which she was the victim. It was also a kick on the lower belly which had produced the organic deviations of the second species of *thlipsencephalus* observed by M. Geoffroy; but this species, as well as the first, presented smaller dimensions, the individuals to which they belong having been only sixteen inches in length. On examining with more attention, and with the aid of dissection, the new *thlipsencephalus* which was submitted to him, he found that it differed from the first two by characters so important, that he was led to consider it as a new genus, to which he gives the name of *Nosocephalus*. Like the *thlipsencephalus*, it is the natural and al-

most necessary result of a violence exerted upon the organ which contains the product of conception, only at a more advanced period than that at which the deviation would lead to the production of a *thlipsencephalus*. The author concluded with some considerations respecting the theory of monsters. Recurring to the observation which formed the subject of his memoir, he remarked, that the manner in which it was possible to guess, from the inspection of a monstrous production, the cause to which the monstrosity should be referred, and the differences of deviation observed in the *nosoecephalus*, which accord so well with the more advanced period at which the perturbing accident took place, leave no doubt respecting the theory of the formation of these kinds of monsters; so that at least, in well defined cases, science possesses facts which may be considered as attaching themselves to principles sufficiently demonstrated to be capable of being applied to use in the practice of medicine. The theory is so perfect in this respect, that, on the inspection of certain monstrosities, it is possible to assign the month, the week, and almost the day, on which the perturbing accident has interrupted the regular order.

Jameson's Journal.

A Double-headed Female.

A late London journal gives a description, accompanied with an engraving, of a female infant, now living in the town of Sassari, in Sardinia, of the age of five months, having two heads and four arms, or the upper part of two well formed bodies united at the breast. The rest of the body with the legs

are of ordinary form and proportions. The child is thin but in all respects well. One head sleeps while the other is awake, one is nourished by the mother and the other by the nurse, and they are nursed alternately. One head sometimes cries while the other is quiet. The left head is somewhat larger than the other.

American Traveller.

Connected Sisters.

In the following letter we have to record another instance of monstrosity. The appearance among us of the Siamese boys has called attention to this subject throughout the country, and will be the means probably of bringing before the profession many similar cases which have never yet been known beyond the town or neighborhood in which they have occurred.

Madison Barracks, Sacket's Harbor, N. Y., Sept. 9, 1829.

SIR,—As the arrival of the Siamese youths has excited much interest in your city, and among medical men generally, I take the liberty of reporting a similar case, and one that came under my own inspection.—I attended a lady who was delivered of twin female children between the eighth and ninth month of gestation; and without giving the details of the delivery, I will only observe that their probable weight was about twelve pounds,—that they were firmly united from the clavicles to the last false ribs, having apparently one sternum common to both, and one umbilical cord entering at the point of union below. There was a perfect development of every external part, and they were living five minutes before delivery.

If you think this case of any importance, you are at liberty to make such use of it as you please.

Respectfully,

SAM'L G. J. DECAMP,
Assistant Surgeon, U. S. A.

BOSTON, TUESDAY, SEPT. 22, 1890.

DR. GODMAN'S ADDRESSES.

DR. JOHN GODMAN, of Philadelphia, has lately published a series of occasional addresses possessing greater variety in their subjects, and exhibiting more spirit in the manner of treating them, than could have been expected from the nature of the occasions which called them forth. The subjects of these essays are as follows:

—1. Monitions to Students of Medicine. 2. Anatomy taught by Analysis. 3. Professional Reputation. 4. Dissection. 5. The study of General Anatomy. 6. Natural History. 7. Design. 8. The Mechanism of the Human Body. 9. A valedictory Address to Students. With an Appendix on Tight Lacing.

The first, third, and last of the addresses, contain excellent advice to medical men about to commence their course of study. Dr. G. is disposed to place the standard of medical character sufficiently high to be worth the ambition of the most gifted members of the community. The physician must not only acquaint himself with every branch of his profession, but he must keep pace with the learning, the intelligence and the spirit of the times; he must qualify himself to meet on fair if not equal ground, men of finished education in other professions and

pursuits; he must also be prepared to instruct the ignorant, to decide the wavering, and to give aid and counsel in the various embarrassments and difficulties which his friends may meet. Above all he must, in his professional course, act from cool deliberate judgment. He is not to commence a mere routine, and follow on, regardless of new facts, and unconscious of the improvements which are taking place in his science. Dr. G. observes, with great truth and force of expression, that the physician has no right to content himself with doing as well as he can. His duty is to learn to do absolutely well; and it is a shameful apology, when the health or life of a patient has been sacrificed through his ignorance, that he acted to the best of his ability. He is answerable for his ignorance as well as his neglect; not indeed to others, because they cannot judge how far his acquisitions have been limited by his capacity; but to himself and his own conscience he is answerable, if he has let the opportunities and means of acquiring knowledge pass unimproved, and has in consequence found himself unequal to the duties which he undertakes to execute.

Anatomy taught by Analysis.

Under this title, Dr. G. considers the advantage of dissection being performed in the lecture-room in the presence of students, rather than exhibiting to them a subject in which the parts have previously been separated for demonstration. He thinks the amount of information imparted and the clearness of the notions in-

culated, to be infinitely greater in the former mode. The student sees the parts in their natural positions, as they are presented by the removal of successive layers, as it were, of integument, and while he acquires the science of Anatomy, receives also a practical lesson to guide him in making his own researches.

There is much truth in this reasoning, and the mode of lecturing alluded to is, to a certain extent, undoubtedly the best. Few lecturers, however on anatomy devote sufficient time to their course to perform all the dissections required in presence of their classes; nor would a lecture thus conducted have sufficient animation and interest for the majority of students. The truth is, that it is impossible for young men to learn anatomy in a lecture-room, however excellent the demonstrations which may be given. To acquire any knowledge of this science, they must dissect for themselves. It is true that they will commence doing so more neatly and adroitly, if they have once or twice witnessed the movements of a skilful dissector;—but for the anatomist to go through the whole dissection of a subject in order to teach his pupil how to use his knife, would be as absurd as for a novice in *Masonic* mysteries to watch the erection of a complete edifice, that he might learn how to place one brick accurately upon another. Some dissection in a lecture-room is inevitable; because successive portions of a demonstration may require states of the parts absolutely incompatible with each other; and therefore their relations may require

to be altered during the delivery of the lecture. This contingency provided for, the subject may be very properly prepared for demonstration beforehand; the parts carefully separated, and then replaced so as to be called up in their natural order by the lecturer. The whole is shown, the parts also are exhibited, and the problem proposed to the student is, to take another whole precisely similar in its construction, and separate that whole into similar parts. That anatomy ought to be taught by analysis is certainly true; we apprehend no man in his senses would think of teaching it by synthesis; and provided the true method of teaching be adopted, we regard the greater or less use of the knife in the lecture-room as a point of minor importance.

Study of General Anatomy.

In the fifth essay, Dr. Godman vindicates the importance of an accurate acquaintance with anatomy to the medical practitioner; and deprecates with great earnestness the existence of those prejudices, among all orders of society, which oppose the greatest obstacle to its successful cultivation. He declaims vehemently against the hostility exercised against dissection, and the opposition of friends to post-mortem examinations. Such prejudices he maintains ought long since to have been exploded, along with the superstitions of the dark ages, of which they make part. Their continuance at the present day is a disgrace to the age; a foul blot on the character of a Christian people, who, professing to believe the immortality and immateriality of

the soul, yet regard with such degrading attachment the frail tenement of clay, which its vital inmate has quitted forever.

We confess ourselves not without apprehensions that the eloquence lavished on this topic by medical writers here and abroad, has been most unprofitably spent. We may call it ignorance, prejudice or materialism, as we please, but it is certain that there is something revolting to the human mind in the idea of mutilating the remains of one, who but a few days since was living and breathing like ourselves; and that it is much more according to our notions of respect to our deceased friends to deposit their bodies in the earth, than to consign them to the knife of the anatomist. Nor can this repugnance be regarded as one of the errors of our education. The sentiment has existed in all ages, and in every degree of civilization. The bodies of deceased friends, whether buried, burned or embalmed, have been universally held sacred and inviolable. To the professed anatomist, in whom habit has produced familiarity with his occupation, there may seem to be nothing more unpleasant in prying into the structure of a corpse than in examining that of a watch, or any other piece of mere human mechanism. But these notions are not so easily received by the generality of mankind. By the majority, the idea of dissection, and even of examination, is viewed with horror; and the proceedings of the dissecting-room, whether seen or described, are regarded as an utter abomination. It is true that from considerations of respect

to a physician, or from the more patriotic desire of promoting public welfare, examinations are permitted. This is obviously a sacrifice of feeling to duty; and even the strongest sense of obligation frequently fails in reconciling the mind to what is still held as a sort of sacrilege. Who then are they that are to go farther, and to give up the dead to the knife of the anatomist? Not the rich surely; this is scarce even pretended to be hoped for. We may safely add, not the poor; for the price is too much, at which even the poorest will barter away the objects of their respect and affection. Of all these things we should be fully apprised.

But let us remember, and urge the consideration on others, that there are those who die *without friends*; and it is on the circumstance that individuals die in public institutions whose remains are allowed to be interred without the attendance of a solitary mourner, that anatomists, both here and abroad, have founded a strong claim to legislative enactment in behalf of their science. It is needless to say how strong is the appeal which they have made, on this ground, to the good sense and good feeling of assemblies composed of those entrusted, as the wisest and the best, with the solemn duty of making laws for the human race. The answer which may be expected to such appeal, in the present state of public sentiment, may be learned from the history of the late bill introduced into the British Parliament. They manage things better in France, it is true; but whether they are to be managed any better in this country,

must depend entirely on the profession itself. If every individual member of the faculty will exert his influence in his own private circle, then may we hope for such a change as will enable us to heal the sick, and the public to feel secure against the ravages of the resurrectionist.

In the address on the study of General Anatomy, Dr. G. reviews the discoveries of Bichat and the doctrines of Broussais, which he thinks have united to introduce juster views in regard to the nature of diseases, and more judicious modes of treatment, than had before been possessed by medical practitioners. Too much honor certainly cannot be paid to the name of Bichat. His labors prove a union of genius and industry such as fall only to the lot of the favored few, destined to mark and ennoble the character of the age in which they live; and the philosophical mode of investigating morbid changes which his works have so much contributed to promote, has produced almost a new era in medical science. Whether Broussais is entitled to equal distinction among the benefactors of mankind, may be better decided when his peculiar views have been more fully submitted to the test of experience.

Natural History.

In discoursing on Natural History, Dr. G. traces the various forms of life, as it is exhibited in various degrees of perfection, from the amorphous vegetable, scarcely to be distinguished from the rocky bed to which it is attached, through the different orders of animals up to man.

He remarks on the singular fact, that some vegetables evince a sensibility and irritability independent of those which serve to maintain their vitality and growth. Instances of this are found in the sensitive plant, and likewise in the *Dionea muscipula*, or Venus' fly-trap, which grows in some of the southern states. The latter plant is said to possess the singular property of folding its leaves, when a fly lights upon them, so as to detain or crush the aggressor. The author conceives this to be a strong argument that these plants actually *feel*, in the common sense of the term, though he is not ready to admit that they exercise volition. We are unwilling to allow that the two properties are separate in the instances alluded to, nor do we see the necessity of admitting the existence of either. If the plant moves because it feels a touch, it seems unreasonable to deny it the intervention of a will. Again, it appears very improbable that a sensibility to, and the wish and power to avoid injury, should be limited in its operation to a single noxious agent, and that of the slightest description. Sensibility and motion in animals are always commensurate, and they constitute their security against danger and injury. In this instance, on the contrary, the sensibility would appear to be peculiarly exquisite, and the means of resistance or escape almost nothing. We should be disposed to regard the phenomenon, in both these productions, as depending on a principle of *irritability* distinct from sensibility.

In speaking of the nervous constitution of animals, our author follows

the classification of Bichat, and considers it divisible into two systems,—those of organic and of animal life. He appears however to have somewhat deviated from the path laid out by his illustrious guide, and the distinction between the two systems, as made by him, wants much of the clearness which it possessed as laid down by the author of the *General Anatomy*. A single quotation, and a short one, will serve to illustrate our meaning.—“The nervous system of organic life is found in all those animals which, though destitute of brain, are capable of performing some of the curious actions which, studied by themselves, would imply the highest efforts of reason and forethought, did we not know that such actions are performed without reference to reason, and are entirely independent of all influence of education. Such are the actions of the bee in constructing the cells of her comb; of the wasp in gathering the materials for the construction of its nest, and in procuring food for its young.” If by this extract is understood, as the words obviously seem to imply, that the bee and the wasp are destitute of animal nervous organization, the assertion is wholly at variance with the views of Bichat; since, according to this author, all action and motion which are voluntary on the part of the animal, take place in virtue of such organization. The organic system, properly so called, serves merely for the preservation of the animal itself, and has no more to do with the movements of the bee in constructing her cell, than with those of the man in building his ha-

bitation. We notice this instance of inaccuracy as one of a very small number in the work. The author himself remarks that most of those who condemn the system of Bichat, show that they either have not read his works, or have mistaken his meaning. We regret that he should have led us to advert to the fact that some of his admirers have laid themselves open to a similar accusation.

The distinction intended to be set up, however, between the superior and inferior orders of animals, is one of no small moment, since it establishes a boundary between reason and instinct; attributing the former to the superior tribes, and limiting the inferior to the possession of the latter. Whether our author has taken too bold a step in admitting any portion of the brute creation to a share of this much contested prerogative, we know not; but we do not well see how he could have done otherwise, in view of those facts which the study of Natural History presents to every candid observer. Speech and reason, it is said, are the characteristics of man. But what is reason? We venture to maintain that no definition can be given of this faculty which will include the human race and exclude the animal. Is it the province of reason to propose to itself an end, and to devise means suitable for the attainment of that end? The dog, whose master has met with an accident which disables him from proceeding on his journey, sets off at once in pursuit of assistance; attracts if possible the notice of some passer-by; urges him by every mode of entreaty to turn and follow; and guides

him quickly to the scene of suffering. The bee, whose waxen structure has been injured, repairs the damage inflicted with the greatest despatch and the most consummate skill. The elephant, whom some unthinking visitor has been wanton enough to provoke, makes no show of unavailing rage, but marks out the aggressor, knows him again at the end of weeks or months, even among a hundred others, and generally contrives, by some unexpected mode of retaliation, to make him pay a severe penalty for his malice or folly. If then forethought and contrivance constitute reason, we see not how we can deny its possession, in a considerable degree, to the more favored of the animal creation.

But it is said that animals are not susceptible of being improved by education. So far as this relates to successive generations, the assertion cannot and need not be answered. It is evidently not intended by nature, that the habits and mode of living of the inferior animals should be materially altered in this manner. Yet the domesticated animals transmit their acquired pacific habits to their offspring, and thus produce a sort of hereditary improvement. A more curious fact is, that pointers which have been properly trained, communicate to their young, in an increased degree, the faculty of acquiring the habit which renders them valuable to their possessor. In a more limited sense, all animals are improved by education. The powers of song and of flight, acquired by the young bird from its parent, are a proof of this, no less than the artificial en-

dowments conferred on learned pigs, dogs, &c., by human instructors. This capacity for receiving instruction is confined confessedly within narrow limits; nor is it sufficient to say that these are formed solely by the want of oral communication; for the deaf and dumb, among human beings, learn much farther and faster than animals: it is limited by the constitution of nature; but still its existence cannot be denied; and this is quite as much as is necessary to the point in question.

It is perhaps proper to advert to one view of this subject, in which it assumes apparently a higher importance than is at all due to it as a mere speculative discussion. It may be said that, in admitting the affirmative of this question, we necessarily allow that the inferior animals have souls,—and thus involve ourselves in the dilemma of denying that the soul is immortal, or of admitting that these, our humble companions on earth, are to share with us the enjoyments of another state of existence. We do not regard either alternative with any excessive alarm. We have better security for a future life than can arise from any speculative distinction between discerptible and indiscerptible, between matter and spirit; and if the annihilation of soul is every way possible in itself, it is still impossible for those who have the promise of immortality. Neither has the creed of the poor savage, that “admitted to an equal sky, his faithful dog shall bear him company,” the power to inspire us with any terror, though the notion is too vague and visionary for serious discussion.

On the other hand, is there nothing to dread in admitting an instinct arising out of organization merely? If something so near reason can result from a mere skilful arrangement of parts, it is by no means extravagant to infer that reason itself is the product of a still nicer construction. To admit this, were to countenance materialism in its grossest form. Met on both sides by difficulties so serious, we seem compelled to adopt in our conclusions a middling course. Some share of the reasoning faculty may safely be conceded to the inferior animals without material injury to our own prerogative; and at all events it is better to raise them toward our own rank in the scale of being, than by vilifying those faculties which we possess in common, to involve ourselves and them in a common degradation.

Design.

In his address to the academy of Design, our author makes some very judicious remarks on the anatomical knowledge required by the artist, in distinction from that which is needed by the physician and surgeon. The models of Grecian sculpture, in which every part of the form is so perfectly developed, receive from him a just tribute of admiration. It is obvious, that in order to produce symmetry in a living body, it is necessary to have given to each muscle its due proportion of exercise. Hence the difficulty of finding, in an artificial state of society, a perfectly proportioned figure. Artisans, according to their various occupations, exercise particular sets of muscles; and thus

in each class of these persons, one portion of the frame will appear to be developed out of proportion to another. The want of due muscular development is still more obvious, though for a different reason, in the studious and sedentary class. On the other hand, the savage himself is led, from habit or necessity, to adopt peculiar movements in preference to others, so that his gait becomes awkward and his form impaired. The best forms among savage tribes are, according to our author, those of the Osage Indians, and others similarly situated. As their principal exercise is horsemanship, they are free from the defects observable in other Indians; their frames are remarkably well proportioned, and their movements almost uniformly graceful.

Mechanism of the Human Body.

The eighth essay, according to its title, treats of the mechanism of the human body. This subject is a novel one, and when pursued further than it appears to have been as yet, will be extremely interesting.

The remarks on Tight Lacing, which conclude the volume, contain an eloquent and forcible appeal to the ladies on their indulgence in so pernicious a practice. As these remarks have already appeared in our pages, it would be superfluous to say that we admit their correctness, and approve of the spirit in which they are written. With regard to the good which is to be done by writing on this subject, we are not very sanguine in our hopes. Fashionable follies are not easily put down by

direct attacks, either from the pulpit or the press. Something may be done by rendering a custom ridiculous, but very little is to be effected by gravely proving it to be wrong. The Doctor's anecdote about the servant-maid and the tea-kettle is, for domestic use, fairly worth the whole of his argument and his invective together. If those who decry tight lacing really expect to make converts among the fair victims of this injurious practice, they need do no more, in order to be undeceived, than to attempt enforcing their doctrines on their own wives and daughters. Reform, like charity, may well begin at home; and if the reformer fails there, he will be the less disappointed by ill success abroad. The truth probably is, for we will not be positive on this point, that the existing rules in regard to dress do not require lacing to be carried to that degree in which it is attended with injury or danger; and to deny that in a moderate degree it improves the figure, would imply, in respect of taste, something little short of total depravity. Those who, from excessive vanity or a worse motive, choose to straiten their persons to one half the natural dimensions, deserve the ill consequences of their folly and wickedness; but to hold a custom answerable for all the evils of its abuse, seems scarcely conformable to reason and to justice.

It is needless, perhaps, after this analysis of Dr. G.'s work, to add that it will not diminish the high reputation which the author has already acquired for his labors in Natural History and Physiology. The volume is replete with excellent philo-

sophy, pure morality, and an evident zeal for the promotion of science; and the sentiments are conveyed in a style which, if sometimes too ambitious for the subject, is always animated, and generally elegant. The title, after all, scarce does justice to the collection. It is in fact, as we have considered it, a series of medical essays, and as such ought to have a place in the library of every practitioner.

EXCISION OF THE SUPERIOR MAXILLARY BONE FOR OSTEO-SARCOMA.

THIS operation, which has hitherto been followed by fatal consequences, has been successfully performed in the Hospital at Lyons, by M. Gensoul, Chirurgien-en-chef. A professional gentleman who visited the cabinet of M. G., which is peculiarly rich in specimens of diseased structures, says:—

Among others, he produced a specimen of osteo-sarcoma of the maxilla superior of the left side, which he had extirpated some months previously, together with the greater portion of the maxilla. The method pursued was, to use his own expression, "chiseling" out the disease; and I was astonished to hear him say, it was completed with scarcely any hemorrhage, no vessels requiring ligature after the superficial branches divided by the first incisions were secured. The mass excised was of considerable thickness, and contained six teeth, the farthest incisor and five beyond. The patient recovered without anything remarkable occurring, and M. Gensoul exhibited a drawing taken when he left the hospital, in which, though the scar presented rather a formidable appearance, the deformity in outline was not very considerable. He did not expect any return of the disease.

M. G. also mentioned a second case of the same kind, which he had

operated on since the former, and with an equally favorable result. The tumor was smaller, and had not been preserved. This patient, however, had but just left the hospital.

Ligature on the Aorta.—We understand that the operation of applying a ligature on the aorta has been very recently performed at the Exeter Hospital, by that able and intelligent surgeon, Mr. James, for an aneurism of the external iliac artery, situated very high up. A ligature was, in the first instance, placed on the distal side of the aneurismal sac, on the femoral artery; which measure having failed to produce the desired effect, and symptoms of the most urgent description having supervened, the aorta was secured after the manner adopted by Sir A. Cooper. The patient survived the operation but a very few hours.

Prov. Med. Gazette.

Quicksilver in Constipation.—A severe case has been recently published in a London Journal, in which a stricture of the rectum proved fatal, after many potent remedies had been administered without the least benefit. Calomel, colocynth, and croton oil failed to force the barrier, and half a pound of quicksilver was given two days before the patient's death.

On examining the intestinal canal, the rectum was found to be of the enormous length of three feet, and so much contracted, about six inches above the sacrum, as scarcely to admit the tip of the finger. Above the stricture the bowel was greatly distended with feces, and part of the quicksilver was lodged in the sigmoid flexure of the colon.

Close Imitation of Nature.—Dr. Abner Horton, of New-York city, has succeeded in forming an artificial eyelid for a black boy. This important operation was performed in a short time, and in a few days afterwards the boy had a very sightly eye, answering all the purposes of a natu-

ral one. The ball of the eye had been gored by an ox, and several attempts had been made to unite or restore the detached eyelid by other physicians, which all proved abortive.—*Daily Ado.*

Triple Dentition.—A gentleman in Portland, Maine, at the age of 75, years, had an entire new set of teeth, which he lived to exercise and enjoy as long as the first set. This gentleman, who is since deceased, was a relative of the Editor, who can vouch for the correctness of the statement.

A Dyspeptic.—There is now in the Hospital near York, Pennsylvania, a young woman, aged about 16 years, who weighs 364 pounds, and measures 4 feet 9 inches in height, and 4 feet 6 inches round the waist.

A black man, with a wooden leg, made application to the commissioners of the alms-house for assistance. "What do you do for a living?"—says one. "Why," said the black, "I opens oysters in season, and picks up a crumb." "And what else?" "Why I cleans boots when I can get any to clean." "Well, nothing else?" "Why yes, I sometimes Doctors." "Ah, and can you cure the rheumatism?" "Yes sir," said Cuff, when it does'nt reach the marrow of the bone."

We acknowledge the receipt of a treatise entitled, Instructions and Observations concerning the use of the Chlorides of Soda and Lime; by A. G. Labarraque. Translated by Jacob Porter.—Also, A New Theory of Life; by Dr. Baker, of Pennsylvania.

DIED.—In Providence, Dr. Harvey Robinson, *et.* 42—In Warner, Dr. Henry Lyman, *et.* 43—In Louisville, Ky. Dr. Joseph Buchanan, *et.* 43—In Cornwall, Dr. Isaac Marsh, *et.* 58—In Chillicothe, Dr. Edward Tiffin, *et.* 64, formerly Governor of Ohio, and late Surveyor General of the United States.—In Keene, Dr. Josiah Goodhue, of Hadley, Mass. *et.* 70—In New Orleans, Dr. Samuel Ellis, Surgeon Dentist—In Belfast, Dr. William Poor, *et.* 53.

ADVERTISEMENTS.

A NATOMICO-SURGICAL DRAWINGS, and Descriptions of all the Surgical Operations, according to the most approved methods. By L. J. VON BIERKOWSKY. Translated from the German. In two volumes, and 570 drawings on 58 folio plates.

EXTRACTS FROM THE PROSPECTUS.

"Encouraged by the approbation of the Medical Profession, it is proposed to publish a work under the present title."

"This work contains 570 drawings, on 58 plates folio; to which is annexed, in two volumes 8vo. a concise explanation of each surgical operation. The plates exhibit not only the parts interested in operations, in their natural position and size, but, what is much more important, represent the different acts or stages of the whole operation, while others exhibit delineations of such morbid affections as consist in the change of the natural position, structure, color, &c. In order to afford the work at a moderate price, the plates will be Lithographic; and for the purpose of securing perfect accuracy, engagements have been entered into for their preparation in Berlin, under the especial direction of two of the most distinguished Professors of the University of that city."

A specimen of the translation, and the plates, is deposited for inspection at the Bookstore of CARTER & HENDEE, who receive subscriptions for the work.

Subscribers will be furnished with the work, and the first impressions of the plates, at the price of \$30.

The subscription list will be open until the 1st of November, 1829, after which period the price of the work will be raised to \$40.

P. S. For the accommodation of subscribers the work will be issued in five Numbers, at \$6 each, payable on delivery. Sept. 29. 18202N1D.

BERKSHIRE MEDICAL INSTITUTION.

THE Annual Course of LECTURES will commence on the first Thursday in September, and continue fifteen weeks.

Theory and Practice of Physic by H. H. CHILDS, M.D.

Anatomy and Physiology, J. D. WELLS, M.D.

Medical Jurisprudence, S. W. WILLIAMS, M.D.

Theoretical and Operative Surgery, S. WHITE, M.D. and S. P. WHITE, M.D.

Materia Medica, Pharmacy and Obstetrics, C. B. COVENTRY, M.D.

Chemistry, Botany, Mineralogy and Natural Philosophy, C. DEWEY, M.D.

Matriculation ticket, \$3. Fee for Lectures, \$40. Library ticket, \$1. Graduation, \$15.50. Board, including washing, lodging and room, \$1.75 a week.

Pittsfield, July 22, 1829. aug4tsept30

MEDICAL INSTRUCTION.

THE subscribers continue to receive and instruct Medical Pupils upon the terms formerly announced.

The Pupils are admitted to the medical and surgical Practices of the Massachusetts General Hospital, and receive private instruction from the subscribers.

JAMES JACKSON,

WALTER CHANNING.

For terms, apply to Dr. Channing, Tremont street, opposite Tremont House.

Sept. 22.

3t.

HARVARD UNIVERSITY.

MEDICAL LECTURES.

THE MEDICAL LECTURES in Harvard University will begin in the Massachusetts Medical College, Mason-street, Boston, the third WEDNESDAY in October next, the 21st, at nine o'clock, A. M.

Anatomy and Surgery, by Dr. WARREN.

Chemistry, Dr. WEBSTER.

Midwifery and Medical Jurisprudence,

Dr. CHANNING.

Materia Medica, Dr. BIGELOW.

Theory and Practice of Physic, Dr. JACKSON.

Students attending the Medical Lectures are admitted, *without fee*, to the Surgical Operations and Clinical Practice of the Massachusetts General Hospital, during the course.

Aug. 4. W. CHANNING, *Dem.*

eoptOct21.

A TREATISE on the Scrofulous Disease, by C. G. HUFELAND, Physician to the King of Prussia, &c., translated from the French of M. Bousquet, by Charles D. Meigs, M.D., is just received and for sale by CARTER & HENDEE.

Sept. 8.

Published weekly, by JOHN OOSTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

VOL. II.]

TUESDAY, OCTOBER 6, 1829.

[No. 34.]

I.

EFFECTS OF PHOSPHORUS AND OF HEAT ON THE ANIMAL BODY.

THE only novelty that we know of at present likely to interest our readers, is the appearance on the stage of a M. Chabert, who professes to eat arsenic and drink prussic acid, and with the wonders of whose exploits some of the newspapers have lately been teeming.

The general impression of those who have seen Chabert is in his favor, in so far as regards the fact of his swallowing certain substances which, on the generality of mankind, act as poisons. At his last exhibition, for instance, he swallowed twenty-two grains of phosphorus; and on a former occasion is said to have taken two scruples. The phosphorus was brought by Sir G. Farrant, and Chabert rapidly bit off some pieces, amounting to the quantity above mentioned. These were put into a spoon; and while he kept his hands behind him, to prevent the idea of any undue interference on his part, they were apparently, and we believe really, taken down his throat. He held the head back, with the mouth open, and the tongue slightly protruded, performing the act of deglutition very rapidly, so as to avoid allowing the phosphorus to remain in contact with the tongue. This is unquestionably an extraordinary feat, and shows a power of

resisting the effects of such doses of this substance as would probably destroy most individuals: still there is nothing in it which appears to us absolutely marvellous, as phosphorus, in smaller quantity, has frequently been taken with impunity.

Mentz, a German physician, recommended phosphorus, in 1751, as a powerful stimulant, and published some cases illustrative of its efficacy; and on his authority, it has since been occasionally used in Germany.—In France, Alphonse Leroy experimented with it on his own person, and took three grains in treacle. This caused great uneasiness, which, however, was relieved by copious draughts of cold water; and he affirms that next day his muscular strength was considerably increased. He relates the case of a young man who recovered from the advanced stage of typhous fever under the use of phosphorus, and of an old man who was restored by it from a state of extreme debility.—Dr. Conradi also asserts that he has known it succeed when other stimulants had failed. All the experiments, however, did not terminate so favorably.—Weikard was consulted by a Jew, who had lost his speech and the use of his limbs, in consequence of an apoplectic seizure. Two grains of phosphorus were administered to him, rubbed up in a conserve: next day three grains were given in some honey; and Weikard

informs us that it was his intention to have increased the dose still farther next day, but that in the meantime the unfortunate Jew was taken ill, and died on the fourth day in great agony.—In our number for July 11th will also be found the case of a chemist at Biel, who was poisoned by three grains.—Brera likewise tried it in a case of paralysis. He gave two grains dissolved in mucilage of gum arabic, and directed it to be taken in divided doses, so that each should contain half a grain of phosphorus. His patient appeared to be better after the first dose, but scarcely had she taken the last, before she was seized with burning pain in the stomach, and died in twenty-four hours.—Alibert tried a series of experiments with this substance, principally in epilepsy. The method he adopted was to incorporate a grain in an ounce of mucilage, and to give it in the course of twenty-four hours. The general result was, that it impaired digestion, without curing the disease for which it was given.—The latest publication on this subject, so far as we know, is that of M. Lobstein, which appeared in 1815; and the opinion he expresses with regard to the medicinal powers of phosphorus is so favorable, that we cannot but regret that it is not corroborated by others. He used it chiefly in fever, and states that the pulse improves, and delirium diminishes very speedily, under its exhibition. He also mentions that the evacuations become luminous in the dark, when it is given in sufficient quantities.—Hufeland says that a small portion of phosphorus, if allowed to come into contact with the stomach, is apt to excite inflammation, but

speaks favorably of it as a stimulant, in doses of about one grain in the day, when carefully mixed with mucilage by long-continued trituration.—To return to M. Chabert:—It appears that the internal exhibition of phosphorus in small doses has often been practised; and that one individual (Leroy) took so much as three grains. But it is the result of general experience, that the system may become reconciled to large doses of the most powerful agents, provided they are very gradually and cautiously increased;—witness opium. Half a grain is the usual dose of lunar caustic, but we have known an individual take sixty grains in the course of twenty-four hours, in five-grain pills,—a feat scarcely less wonderful than that of Chabert.

As to arsenic and prussic acid, it will be time enough to inquire about them when it appears that he has actually taken them. At present his ability to do so with impunity rests on his own authority. With regard to holding his head for a short time in the fumes of arsenic, it is of very little importance even if he really did it. Nor can we avoid hinting, that throwing sulphuric acid upon a chafing dish, so as to raise sulphurous acid vapors, and thus half choke those who came near, savored very much of trickery, as did several other parts of his conduct. Neither do we attach much importance to the feat of swallowing oil at 310 degrees. The effect of any body, at a high temperature, in producing a sense of heat, depends very much on the rapidity with which it parts with caloric; in other words, on whether it be a good or bad conduct-

or. Thus, it might have been observed, that though Chabert suffered the oil to be put into his mouth, he avoided letting the spoon even touch his tongue, because the metal, though it could not be hotter than the oil which it contained, parted with its heat much more rapidly, and would thus have burnt him.

M. Chabert is represented in the *Literary Gazette* as possessing three antidotes—one, a preservative against vegetable, another against animal, and a third against mineral poisons; nay, he even holds out that he has an antidote to hydrophobia, and is able to save men “from every species of poison.”

If he really possess such important secrets, the Editor of the *Literary Gazette* thinks “that they ought to be ascertained, and he largely rewarded as a public benefactor.” It is only the notice which has been taken of these performances in so respectable a publication which induces us to advert to them at all; and we agree that the secret of his antidotes ought to be purchased, “if he really possess such;” but we do not believe that he does. That the same thing should prove an antidote to all the poisons taken from one kingdom—to arsenic, for example, and corrosive sublimate, and verdigris, and sulphuric acid,—agents having nothing in common in their chemical composition, or in their action on the animal body—is too monstrous an improbability for any intelligent person to credit. And even if it should be found that Chabert can really take these poisons with impunity, which we do not imagine, we should still hold it more probable that he had gradually ac-

customed himself to them than that he possessed any one general antidote. We may mention, too, that Chabert retired to change his dress after he had taken the phosphorus and oil, and remained long enough absent to have vomited these substances, if he was desirous of so doing, and that he took no poison after he had been in the oven. We suggest this merely as a possibility, but if so it would deprive the experiment of much of its anomaly, as it is expressly stated by Lobstein that the effects of a dose of phosphorus are scarcely ever perceptible in less than four hours. The subject, however, is worthy of some attention: but then the investigation would require to be carried on by much cooler heads than those who have already volunteered their testimony in Chabert's favor, and who seem inclined to swallow all his assertions with as much avidity as they did his beef-steak. And this brings us to the last part of the performance, which, though it excited the greatest admiration on the part of some of the spectators, was in reality the least wonderful of the whole. An oven was heated, into which Chabert entered in a flannel dress and thick-soled shoes, being provided with a sort of funnel, communicating with the external air, through which he breathed. So far from having any means of guarding against the effects of the heat, he was dreadfully oppressed, and at the end of eight minutes and a half burst out panting and exhausted, being evidently quite unable to bear it a moment longer. His breathing was performed very rapid, the expirations being performed forcibly and with much puffing. What the ex-

act heat of the oven was, we are unable to say, as no thermometer was placed in it at the time Chabert entered ; but shortly after he came out, one which was placed in it (much against his inclination) only rose to about 180 degrees !

The heat of the oven in this case, therefore, was probably not greater than that of the rooms in which Sir Charles Blagden, Sir Joseph Banks, and others, remained for a considerable time without any communication with the external air, and with comparatively little inconvenience. According to M. Tillet, girls who had been accustomed to attend an oven, bore for ten minutes a temperature equal to 280 degrees Fahrenheit ; and a Spaniard, named Martinez, within this twelvemonth, used to exhibit at the Tivoli, in Paris, who remained in an oven, at the temperature just mentioned, long enough to have a fowl roasted beside him, and to eat it.

The most scientific experiments of this kind, and consequently the most interesting, are detailed by Dr., afterwards Sir C. Blagden, in the sixty-fifth volume of the *Philosophical Transactions*. As these may not be within the reach of all our readers, we subjoin some extracts.

" Soon after our arrival, a thermometer in the room rose above the boiling point : this heat we all bore perfectly well, and without any sensible alteration in the temperature of our bodies. Many repeated trials, in successively higher degrees of heat, gave still more remarkable proofs of resisting power. The last of these experiments was made about eight o'clock in the evening, when the heat was at the greatest : a very

large thermometer, placed at a distance from the door of the room, but nearer to the wall than to the cockle, and defended from the immediate action of the cockle by a piece of paper hung before it, rose one or two degrees above 260. Another thermometer, which had been suspended very near the door, stood some degrees above 240. At this time I went into the room, with the addition to my common clothes of a pair of thick worsted stockings drawn over my shoes, and reaching some way above my knees. I also put on a pair of gloves, and held a cloth constantly between my face and the cockle. All these precautions were necessary to guard against the scorching of the red-hot iron. I remained eight minutes in this situation, frequently walking about to all the different parts of the room, but standing most of the time in the coolest spot, near the lowest thermometer. The air felt very hot, but still by no means to such a degree as to give pain ; on the contrary, I had no doubt of being able to support a much greater heat ; and all the gentlemen present, who went into the room, were of the same opinion. I sweated, but not very profusely. For seven minutes my breathing continued perfectly good ; but after that time I began to feel an oppression in my lungs, attended with a sense of anxiety, which gradually increased for the space of a minute. I thought it most prudent to put an end to the experiment, and immediately left the room. My pulse, counted as soon as I came into the cool air, for the uneasy feeling rendered me incapable of examining it in the room, was found to beat at the

rate of 144 pulsations in a minute. A chief object of this day's experiments was to ascertain the real effects of our clothes in enabling us to bear such high degrees of heat. With this view I took off my coat, waistcoat, and shirt; and in that situation went into the room as soon as the thermometer had risen above the boiling point, with the precaution of holding a piece of cloth constantly between my body and the cockle, as the scorching was otherwise intolerable. The first impression of the heated air on my naked body was much more disagreeable than I had ever felt it through my clothes, but in five or six minutes a profuse sweat broke out, which gave me instant relief, and took off all extraordinary uneasiness. At the end of twelve minutes, when the thermometer had risen almost to 220 deg. I left the room very much fatigued, but no otherwise disordered, my pulse being 136 in the minute. Several of the gentlemen present, as well as myself, went into the room without our shirts many times afterwards, when the thermometer had reached almost to 260 deg., and found we could bear the heat very well, though the first sensation was always more disagreeable than with our clothes. To prove that there was no fallacy in the degree of heat shown by the thermometer, but that the air which we breathed was capable of producing all the well-known effects of such heat on inanimate matter, we put some eggs and a beef-steak into a pan or tin frame: in about 20 minutes the eggs were taken out roasted quite hard, and in 47 minutes the steak was not only dressed, but almost dry.

Another beef-steak was rather over done in 33 minutes. In the evening, when the heat was still greater, we laid a third beef-steak in the same place: and as it was now observed that the effect of the heated air was much increased by putting it in motion, we blew upon the steak with a pair of bellows, which produced a visible change on its surface, and seemed to hasten the dressing: the greatest part of it was found pretty well done in 13 minutes.

"The same person, who felt no inconvenience from air heated to 211, could not bear quicksilver at 120, and could just bear rectified spirit at 130; that is, quicksilver heated to 120 deg. furnished, in a given time, more heat for the living powers to destroy than spirits heated to 130 deg. or air at 211 deg."

Dr. Dobson and several others went into the sweating-room of the hospital at Liverpool, when it was heated to 224, without inconvenience.

The above remarks from the editorial department of the London Medical Gazette, were elicited by some experiments which were described in our Journal for Sept. 8.

II.

Observations on the Nature, Cause and Treatment of Hay Asthma.

(Concluded from p. 518.)

REGARDING spasm as the proximate cause of the disease, I exhibited, in the first cases which came under my notice, the powder of ipecacuan and the tartrate of antimony, (sometimes in combination with camphor and extract of hyosciamus), in such doses as to create a constant nausea; which, by its antispasmodic effect, never failed

to afford considerable relief. Nausea, however, is too unpleasant and depressing a sensation to be long endured; and in some idiosyncrasies it cannot be in the least produced without leading to constant vomiting, or efforts to vomit, which only serve to augment the headach and general distress. Finding that nauseating medicines were but of limited application, I made trial of the hydrocyanic acid, in doses of half a drop, or a drop, every two or three hours; giving, in the intervals, from three to five grains of the carbonate of ammonia, with a quarter or half a grain of powder of ipecacuan. This plan invariably alleviated the symptoms; and when they were not exceedingly violent, removed them entirely. Sometimes I administered the carbonate of ammonia, with ipecacuan, alone, and certainly never without greatly facilitating the difficulty of breathing.

No medicine, however, which was had recourse to, was of such utility, and so speedily and effectually removed the paroxysms, as the ethereal tincture of the *Lobelia inflata*. It was given in doses of one drachm, repeated every three or four hours. The obstructed respiration was always rendered more free by the first dose, and after the second it became perfectly easy and natural; and to this soon followed the disappearance of all the other symptoms.

During the continuance of the asthma, the patient should confine himself to the house as much as possible; and should eat biscuit, and the more digestible kinds of food. He should sedulously abstain from all spirituous and fermented liquors, and use only coffee for drink. He should also abstain from fresh vegetables and fruit of

every description; because these, by readily entering into the acetous fermentation, generate within the stomach an abundance of gaseous matter, whereby this organ becomes distended, and respiration of course greatly impeded.

Care should also be taken to obtain a daily and free evacuation of the bowels, by the exhibition of one or two drachms of the sulphate of magnesia every morning. Purgings is improper. Diuretics, likewise, should be given, in order to preserve a plentiful secretion from the kidneys; for I have often noticed that whenever the urinary discharge was copious, the fits were generally less severe than when this discharge was scanty.

As soon as the inflammation of the eyes, and irritability of the mucous lining of the nostrils supervenes, it should be subdued by keeping a piece of fine linen, wetted with an evaporating lotion, constantly applied to the forehead and across the nose. If this measure be not persevered in, the bronchiæ will become affected by the spreading of the morbid action, and the asthmatic symptoms will soon make their appearance. But if the ophthalmia and irritable state of the schneiderian membrane be timely reduced, the paroxysm will be postponed, and often entirely averted; and if it should come on, it will be not only milder, but shorter in its duration.

Opium I found to be decidedly injurious. It increased the fever, headach, wheezing, and suffocating tightness across the chest. Vegetable acids were given, but without success; and blisters and tartar emetic ointment were of no utility; nor was any material diminution of the symptoms ever observed to succeed the inhalation of steam, or

the abstraction of blood by leeches, which were occasionally applied to the chest.

The warm bath was not of the least service, but immersion of the feet in hot water generally proved beneficial. Hay asthma, like every other variety of asthma, depends on a state of general or local debility; and, as far as my experience extends, its best prophylactic is the cold shower bath, which, by its tonic properties, removes that weak and irritable condition which forms the foundation of the disease. This preventive, where it has received a fair trial, has succeeded most completely. It should be commenced in about six or eight weeks previous to the expected recurrence of the complaint; and employed every morning, without intermission, until the hay is being gathered in. Its effects are speedy and most agreeable. If the patient feel any obstruction in the nostrils, heaviness of the head, tenderness of the eyes, tingling in the throat, or impediment of respiration, which he not unfrequently does when he first awakes in the morning, he no sooner uses the cold shower bath than all these threatening symptoms disappear, and he feels light, vigorous and active, and can breathe with the most perfect ease and freedom.

During the employment of the bath, the alvine canal should be gently and regularly acted on by means of saline aperients; and if any thoracic uneasiness be experienced during the day, a dose of the ethereal tincture of the lobelia inflata must immediately be had recourse to.

If the cough continue after the other symptoms have terminated, it is best relieved by opiates, by stimulating embrocations rubbed

on the chest and along the spine, and by change of air.

From what I have witnessed, then, I am disposed to conclude that the cold shower bath, used in the manner and with the precautions I have laid down, will prevent the access of hay asthma; and that the asthmatic fit will at all times yield either to the hydrocyanic acid, or to the ethereal tincture of the lobelia inflata.—*lb.*

III.

DISEASES RESEMBLING INFLAMMATION.

Remarks on a Peculiar Class of Diseases resembling Inflammation.

By Mr. GEORGE NEWSTEAD.

A NUMBER of cases have occurred in my practice* during the last four years, which, with all the external characters of active inflammation, have not been relieved by bleeding, and, in fact, could not bear it to any great extent. The form chiefly assumed by the disease, when I first observed it, was that of pleuritis. Cold chills or shivering, uneasiness in the back and limbs, and frequently vomiting, were succeeded by very acute pain in the side. The tongue had the appearance exhibited in typhus mitior; the pulse was sometimes accelerated, but very often was not disturbed in the beginning; the secretion of urine was remarkably scanty, very high colored, and deposited a thick sediment. It sometimes terminated in three or four days with profuse sweats, and sometimes in a week or ten days by expectoration, tinged often with blood. The pain was so urgent, and the breathing so obstructed, that I did not

* At Howden, Yorkshire.

hesitate to use the lancet ; but the first bleeding generally put me on my guard. I was astonished at the small quantity which commonly flowed before syncope was produced, and also at the slight relief of pain, even where larger abstractions could be borne. Cases like peritonitis began to occur, and I then found that whether the patient complained of the chest or abdomen, the pain was not confined to one part. On examining those complaining of the chest, there was great tenderness to the touch there (a circumstance I never remarked in inflammation of the lungs or pleura), and not only there, but on the abdomen, and very often down the back; and those who said the pain was in the abdomen were affected, in like manner, by pressure on the chest and back, as well as the belly. In some, even the arms and thighs were affected; and whatever part was touched, they shrunk like the subject of acute rheumatism on handling an inflamed joint. This diffused pain on pressure, and the diminished secretion of urine, I fixed upon as the characteristic symptoms of the disease. Although the region of the kidney was usually pointed out as the seat of the most acute pain in the abdominal disease, and the secretion of urine was so much disordered, there was not that frequency of making water, and pain in voiding small quantities, which mark nephritis. The state of the bowels was various;—frequently diarrhoea came on with green stools, or a discharge of bloody mucus; but, as calomel was freely given, I attributed these symptoms to its use. One young man, however, before any medicine was given, had frequent

discharges from the bowels of a thin bloody serum, without tenesmus, and totally different from anything dysenteric. I observed some, where the chest was chiefly complained of, spit up the same kind of serum, like bloody water. The stomach was often irritable throughout the abdominal disorder, and a green fluid was occasionally discharged. I felt an awful responsibility at first, when I dared to treat this complaint without, or with very little, depletion; for patients themselves, identifying what they felt with what they had heard of inflammation, would ask to be bled, but I was alarmed by the exhaustion I had seen follow, and I never, except in two cases, ventured on more than one bleeding, trusting afterwards to leeches, a dozen at a time. My reliance was on opium and calomel, or mercurial frictions. I was partly encouraged to withhold the lancet by the state of the pulse, which was often not above 80, and natural to the feel, when the chest, back and abdomen could not be touched without agony, and even the weight of the bed-clothes was irksome; for, although I am aware that fatal inflammation of the bowels may exist without an accelerated pulse, I fancy that commonly it is when it proceeds from some mechanical obstruction, and that in pure enteritis or peritonitis there must be a quick pulse, though the feel may be variable. The pulse did not often continue in this state,—it generally got to be 100 or upwards after two or three days, when the febrile disorder, which seemed to modify and give a peculiar character to the inflammatory symptoms, had time to develop itself. My cautious practice

has been successful. Out of a number of persons afflicted in this way, I cannot say how many, but I can readily bring forty to my memory, three died. Two of these had been freely bled, and the third was a woman seventy-eight years of age. Within the last month I have treated two cases successfully, even without leeches. I will give you a daily report of one of them.

Jane Cotham, æt. 61. July 7, 1829.—Attacked suddenly, after tea this afternoon, with excruciating pain all over the abdomen, and vomiting.—Eight o'clock, P. M. Complaints of great pain in the abdomen, which is very much increased on pressure,—does not mention pain elsewhere; but, on examination, the whole of the left side of the chest, as high as the axilla, and the back, are as tender to the touch as the abdomen. Pain came on suddenly, but she has felt chilly and not very well all day,—has been uneasy and stiff in her back and limbs two or three days,—has never been subject to any spasmodic affection. Pulse 72, with a sinking feel; tongue pretty natural; bowels moved both yesterday and to-day. Warm bath; two grains of opium immediately.

Pulv. Ipecac. c. gr. x. Hydrarg. Submur. gr. ij. cum dosi mist salin. 4tis horis postea. Ol. Ricini 3j. primo mane. Rub the parts affected, as much as can be borne, with camphorated oil.

July 8th, 10 o'clock, A. M.—Is easier. The pain on pressure continues, however, particularly acute on the left side of the chest, and the right side of the abdomen; cannot take a full inspiration; has no cough; urine said to be very

little in quantity; no stool; has not yet taken the oil; pulse 72, without any sinking; tongue furred. Ordered to take the oil and a black draught every four hours, until the bowels are opened.—Eight o'clock, P. M. Opening medicine has not operated; does not complain much when she is still, but the whole of the abdomen is exquisitely tender to the touch; also both sides of the chest, as high as the armpit: can bear pressure now on the back; pulse 65; tongue a little moister; urine in very small quantity, but nothing particular in its appearance; has vomited after taking an opening draught.

July 9th.—Has been purged freely; does not complain of pain; can bear pressure tolerably well on the abdomen, excepting the right side, which is still tender; has a little tenderness on the right side of the chest, but shrinks from the slightest touch on the left side. Pulse 86; tongue loaded with a moist fur in the middle; evidently febrile action: has continued the calomel and comp. powder of ipecac.

July 10th.—Is easier; has slept well; bears pressure on the abdomen without pain, but it feels hard, and as if the muscles were spasmodically contracted; some soreness to the touch all over the chest. Pulse 80; gentle diaphoresis; urine exceedingly scanty, depositing a thick sediment; tongue rather improving, dry and foul in the middle; bowels open; has vomited repeatedly.

July 11th.—Severe gripings; constant efforts to stool, but evacuates only small quantities of very bloody mucus; has passed, however, during the night, a large quantity of dark green feculent

matter, mixed with scybalæ ; no pain on pressing the abdomen ; a little still on touching the left side of the chest.

Chalk mixture with Tinct. Opii ; three grains of Opium for a suppository.

July 12th.—The griping and tenesmus abated after a dose or two of the mixture ; returned this morning with some discharge of blood : used the suppository, and has been quite easy since ; no pain on pressure ; gums swelled and tender. Pulse 100 ; urine still very scanty.

Continue chalk mixture. To take 3 ss. Ol. Ricini in the morning.

July 13th.—Has had an easy night ; castor oil has produced three good motions ; mouth very sore ; pulse 86 ; tongue beginning to clean ; left off taking medicine.

July 19th.—Has been quite free from pain ; bowels regular ; fast regaining her former health.

Two puerperal women have been severely attacked by the disease. One had two dozen leeches, and the other only one dozen very ineffective ones. Calomel and opium were given, and the bowels were opened once or twice with ol. ricini, combined with ol. terebinth. 3ij. Both recovered.—*Med. Chir. Review.*

SKETCHES OF PERIODICAL LITERATURE.

MEDICAL NOMENCLATURE.

THE difficulty of acquiring a familiarity with the technical names of parts, is, if not the greatest, certainly the most provoking obstacle experienced at the outset by the student of anatomy. We recollect well the strong though ludicrous expression of dismay, with which one of our fellow-students assured us that he had spent two whole months in acquiring a perfect acquaintance with the names of the muscles, which he forgot again at the end of three weeks. We availed ourselves of his experience, and declined undertaking so useless a labor ; but we doubt not there are many others who have had reason to regret an equal sacrifice of their time. He must needs possess a good memory, who can, without frequent reviewal of his text books, keep in his mind the mighty host of names which they contain ; and one

who neither recurs to these, nor is led to engage in practical anatomical researches, will be likely, at the end of a few years, to find that a large proportion have escaped his memory entirely. A late writer in one of the foreign Reviews (the Glasgow Journal), has taken up this subject very seriously. He considers the whole system of anatomical names to be a relic of barbarism, and utterly unworthy to be retained at this period of improvement and civilization. He proposes an entire reformation of this system, not only in regard to the muscles, but also to the bones, the vessels and the nerves. For the plan which he proposes as a substitute, as it is given at great length and with considerable formality, we will not attempt to do it justice. The great principle, however, is to make the different regions of the body the ground of a primary division, and to

distinguish the individual muscles, nerves, &c., in each region, by a simple numerical classification. The names of the regions themselves are to be the most simple and familiar, and thus this formidable array of *technicals*, which now presents so serious an impediment at the very portal of science, is at once to be abandoned.

The plan thus proposed is certainly ingenious, but we should doubt its claim to any higher praise. The defects of the present system, though considerable, are by no means such as to warrant this sweeping reformation. We object, moreover, to the principle on which this change is proposed. Because the names now applied are in many instances inappropriate, and express very awkwardly the qualities of the objects they indicate, it cannot follow that it would be better to reject the aid of analogy altogether, and to make the connection between objects and their names entirely arbitrary. The general idea has been that numbers must be fixed in the memory, by associating them with objects; the plan of remembering objects by numbering them, seems to be a retrograde step in the science of mnemonics.

The great principles of association of which anatomists have agreed to avail themselves in designating the various parts, are derived from three circumstances,—their form, their situation, and their use. The bones, which form, as it were, the groundwork of the classification, and which present a well-defined, prominent and permanent outline, are with

great propriety named from their forms; and the names which designate these are, for the most part, sufficiently expressive and appropriate. The analogies on which they are founded are sometimes fanciful, and some of the terms employed certainly deficient in euphony; but these faults are not of frequent occurrence, and certainly will not justify a condemnation of all. Neither do the names of the bloodvessels or nerves seem open to any very serious objection. The former have their titles mostly from their situations; and for describing these, their relation to the bones in the extremities, and to prominent parts in the great cavities, afford an obvious facility. The nerves are, for the most part, named on the same plan; but as many of these have evident and peculiar uses, their designations are very properly made to express these uses. The additional numerical names of the first twelve pairs of nerves, which would, on the system above mentioned, form the best part of the classification, seem to us rather the most indifferent. Expressing a gradation which does not exist in the parts themselves, they mislead rather than instruct us. Their best claim is to the title of a harmless superfluity.

We come now to the muscles,—parts confessedly difficult to remember by their present names, and presenting the fairest ground for improvement, in this respect, of any portion of the system. The great difficulty in regard to the nomenclature of the muscles seems to be, that it has no reference to any fixed and definite principle. Some are named

from their form, some from their situation, some from their uses, and many from circumstances wholly distinct from either. This variety of itself is calculated to perplex and embarrass ; and when to this is added the want of propriety in some, and the barbarous sound of others, this certainly seems the least attractive part of the catalogue. Now there is one circumstance common to all the muscles, which would seem to present an obvious ground for a uniform nomenclature. Every muscle serves, as its principal use, to connect together two parts, which parts are approximated by its contraction. The united names of these two parts, therefore, must furnish a name to the muscle, expressive at once of its situation and its use ; thus furnishing a double aid to the memory, while the only burden it imposes is that of a new association of terms, which are supposed to be already familiar.

That a nomenclature of the muscles, on this plan, would be an improvement in our system, is by no means a new idea. It is suggested, as is well known, in the *Elements of Anatomy* by Munro ; and a table of the muscles is there given in which a name is applied to each, formed on this principle. Some of these are, perhaps, unnecessarily complicated, and approach too nearly to the nature of description. These, however, are but few in number ; the rest are unexceptionable, and wherever they differ from the names in common use, are certainly much superior. A nomenclature of the muscles formed on this principle, if adopted gene-

rally in our elementary works of anatomy, would materially facilitate the progress of the student.

THE ABSORBENT SYSTEM OF SAILORS.

A PAPER in one of the late numbers of the *Medical Gazette* contains some interesting speculations with regard to the absorbent system, as modified in its functions among a particular class of persons. It is mentioned as a well known fact, that among sailors, complaints or accidents accompanied with effusion are cured with considerable difficulty. Bruises of the skin and integuments, attended with discoloration, heal very slowly ; the glands, when enlarged, are not disposed to return to their former state ; and dropsy is a frequent result of inflammatory action. It is also noticed with respect to this class of persons, that mercury requires a long time to produce its specific effect ; and the occasional occurrence of scurvy, even under a regulated diet, is another fact of the same class. These circumstances would seem to imply an imperfect action on the part of the absorbents, connected with the defective nutrition supplied by the articles of diet to which the maritime class are for the most part limited. This idea was confirmed by finding that in the blood drawn from two or three individuals, not suffering at the time from acute disease, the serum bore to the cruor a proportion of 7 to 2 ; the fibrin was deficient, and the taste of the whole saline and alkaline. It is noticed that the sailors when at sea do not bear bleeding well ; and that in the complaints to which they are subject,

unless acute inflammation is present, exercise and a generous diet answer much better.

RESPIRATION OF BIRDS.

Messrs. ALLEN and PEYs have lately instituted some experiments on this subject, by confining a pigeon in a glass vessel filled with the air employed, which was re-supplied from a gasometer as it became unfit to support life. In the first experiment, made with common air, oxygen was abstracted by the respiration, and an equal volume of carbonic acid substituted. In the second and third, made with pure oxygen, a similar portion of oxygen was removed, the place of which was in part supplied by carbonic acid, and in part by azote. In the fourth, a mixture of oxygen, hydrogen and azote was employed, (the oxygen in the same proportion as in common air,) and it was found that while the volume of the former gas remained undiminished, the mixture parted with its hydrogen, and received in return an equal volume of azote.

CASE OF BULIMIA, WITH DISSECTION.

A MAN aged 60, came under the care of M. Gautier, affected, as was supposed, with diseased liver. He was very fat, his skin of a yellow tinge, and his belly prominent. His appetite was voracious, requiring three large meals a day to satisfy it. He died with symptoms of pulmonary consumption. When examined, the lungs were found to contain collections of matter. The stomach was large and very muscular. The structure of the liver was healthy. Not-

withstanding a minute examination, no trace of a gall-bladder could be found, or any circumstance which indicated its former existence. The duodenum adhered directly to the liver, and a very short canal leading from the intestine, ramified at once in the liver, without sending any branch in the usual direction of the ductus cysticus. It is not unlikely, as suggested by the author, that the rapid digestion and great appetite in this case, were owing to the bile constantly poured into the duodenum keeping up an excitement of this organ, and sympathetically influencing the stomach.

EMPHYEMA.

In the last number of the *Western Journal* is an account of a case of this disease, successfully treated by operation. The patient, a youth of 19 or 20, had been attacked with pleurisy, which was succeeded by gradual enlargement of the left side, general debility and hectic. On examination the heart was found beating with considerable force on the right side, with general "œdema" of the left, which measured nearly twice as much as the former from spine to sternum, and had an indistinct fluctuation.

The incision was made between the sixth and seventh ribs, as nearly as possible to the latter. On puncturing the pleura a volume of pus issued, which continued to run for about forty minutes, when the patient became faint and the wound was dressed. The next day, a canula was introduced, and the pus allowed to discharge itself through it,

which it did for several weeks, after which the wound healed, and his health rapidly improved. The whole quantity of matter discharged, from first to last, was supposed to amount to about four gallons.

EFFECTS OF MORPHINE.

THE *Annali Universali di Medicina* contains an account of some experi-

ments on the effects of morphia on three persons in health, to whom it was administered in doses of one-eighth of a grain, and a grain. The effects were, a pain in the epigastric region, increased frequency of the pulse, dilatation of the pupils, and headach; and subsequently, sleep and diaphoresis. All these symptoms were increased with the dose of morphia taken.

BOSTON, TUESDAY, OCTOBER 6, 1829.

It has been suggested to us by an obliging friend from the country, that in a recent number of the Journal a paragraph was so expressed as apparently to convey an idea prejudicial to the reputation of our brethren out of the city. If any one received this impression, it is proper we should say that such was not the intent of the paragraph, or the spirit in which it was written. The case was a *supposed* one, and supposed expressly and *solely* for the purpose of illustrating an argument:—nothing was further from our intention than to intimate anything unfavorable to the general or professional character, talents, or zeal, of the faculty in the country. On the other hand, about ninety out of every hundred of our subscribers are country practitioners, and it is to them we are indebted for a large proportion of all our communications; *we* therefore should be the last to depreciate their zeal or their ability.

We avail ourselves of this opportunity again to extend to our professional friends, in town and country,

an invitation to favor their brethren, through our pages, with the results of their studies, reflections and experience. The department of the Journal more strictly editorial, we endeavor to render as useful and interesting as our opportunities will allow; the reader will judge whether in this our duty is performed or neglected. He also must judge whether any remissness exists on *his* part, by the appearance of the first pages of the Journal, which are designed more particularly for his *Original Communications*.

PHRENOLOGICAL DEVELOPMENT OF BURKE.

"Two principles in human nature reign, Passions to urge, and reason to restrain."

AN article has been current in most of the newspapers in this country, which is calculated to mislead the public respecting the phrenological development of Burke the murderer. It asserts that the disciples of Spurzheim, on examining the head of this monster, found to their confusion that the organ of Destructiveness was small, and that of Benevolence large.

This is not true. The last number of the Phrenological Journal contains a minute account of the admeasurement of this cranium, and the results are stated with an impartiality which forms a strong contrast with the prejudice which first prompted the newspaper paragraph alluded to.

It is unnecessary to copy here the entire minutes of the examination. Suffice it to say that the organs named were both large—"Benevolence, full," "Destructiveness, very large." It seems that Burke in his schoolboy days was an apt scholar, and not remarked for vicious propensities. When he first went to Edinburgh he "lodged in one of those haunts of wretchedness and vice quaintly entitled the **BEGGAR'S HOTELS.**" Bad company led him on from one degree of crime to another, till at last penury and temptation assailed him together, and found him an easy prey.

Supposing that the organs above mentioned were equally large, so as to neutralise each other, the circumstances mentioned would be sufficient to turn the scale in a person who had few if any moral principles early implanted in his mind: when

therefore Destructiveness got the control, and temptation increased, and success urged him on, it is not at all *confounding* to the Phrenologists that he should have terminated his career on the scaffold.

We pretend not to believe in all the doctrines of Gall and Spurzheim, but, in justice to the science, an erroneous statement of so notorious a case ought not to pass uncorrected.

Smallpox.—A vessel arrived in this port from London, on Saturday last, on board of which a young gentleman died during the voyage, of smallpox. No other person on board has broken out as yet, but as this case may be productive of others, our citizens should, if unprotected, be thoroughly vaccinated without delay.

University of Maryland.—Dr. John D. Wells, of this city, now Professor of Anatomy at Bowdoin College, is appointed to deliver the annual Course of Lectures on Anatomy at the University of Maryland, during the approaching winter.

The "New Theory of Life," acknowledged last week, was by *David Porter, M.D.*, of Brownsville, Penn.; and not, as was accidentally stated, by Dr. Baker.

WEEKLY REPORT OF DEATHS IN BOSTON,

Ending September 24, at noon.

Date.	Sex.	Age.	Disease.	Date.	Sex.	Age.	Disease.
S. 17.	F.	2 yrs	unknown		M.	3 m.	infantile
18.	F.	2	lung fever		M.	11	measles
	F.	19 m.	canker		F.	17 yrs	typhous fever
	M.	31 yrs	hemorrhage		F.	2 1-2	lung fever
	F.	5 1-2	measles	22.	M.	14 1-2	atrophy
19.	F.	9 m.	bilious fever		F.	48	consumption
	F.	13	teething	23.	F.	16 m.	inflammation of the brain
	F.	2 yrs	measles		M.	3	infantile
	M.	10 m.	cholera infantum	24.	F.	56 yrs	consumption
20.	M.	38 yrs	consumption		F.	27	unknown
	M.	15 m.	lung fever		M.	65	cancer on the heart
	F.	4	cholera infantum		F.	9 m.	unknown
	F.	11	do. do.		M.	48 yrs	scrofula
	F.	5 yrs	dropsy in the head		M.	9 m.	unknown
21.	M.	34	consumption		M.	3 yrs	measles
	M.	6 m.	infantile				

Males, 14—females, 7. Total, 21.

ADVERTISEMENTS.

LEECHES, CHIRAYITA HERB,
&c.

EBENEZER WIGHT, 46 Milk Street, has made such arrangements as will enable him to be constantly supplied with the genuine *Medicinal Leech*. He has now on hand some of very large size, and in prime order.

Just received, by late arrivals, a few pounds of *Chirayita Herb*,—Concentrated Compound *Decoction of Sarsaparilla*,—Laurel Water,—Silver Wire Tooth Brushes, from the manufactory of James Front, of London.

Also, from the manufactory of Shepherd, of London, the following variety of *Medicated Lozenges*, viz.:—Coltsfoot—Rhubarb—Soda—Tolu—Heartburn—Paregoric—Magnesia—Steel—Camomile—Nitro—Cayenne—Opium—Fruit—Ginger—Aniseed—Ipecacuanha—Lemon—Rose—Peppermint and Sulphur.

•• Strict personal attention paid to Physicians' prescriptions, and family medicines. Oct. 6. eop.

MORBID ANATOMY.

CARTER & HENDEE have just received,—The Morbid Anatomy of the Stomach, Bowels and Liver; illustrated by a Series of Plates from Drawings after Nature, with explanatory letter press, and a Summary of the Symptoms of the Acute and Chronic Affections of the above-named Organs. By JOHN ARMSTRONG, M.D.

The above work will be completed in six numbers, at \$6.00 each. Three numbers are already published. Subscriptions received by C. & H.

Oct. 6.

2am3m

CONSOLIDATED COPAIVA.

“**C**OPAIVA may be given in this form without the least inconvenience. Neither communicating taste, nor imparting odor to the breath, it is also retained without the least disquietude or uneasiness to the stomach; and I am informed by Dr. Rousseau, that in large doses it does not purge.”—*Phil. Journal of Med. Sciences*.

See an article in this Journal, Aug. 18th.

OIL OF BLACK PEPPER.

This is a much more active preparation of Piperine. One drop is fully equal to

six grains of the latter. It is a valuable adjunct to Quinine. One or two drops, added to six grains, will greatly increase the efficacy of that medicine.

For sale by NATHAN JARVIS, 188 Washington Street, where Physicians will find medicines at as reasonable terms as at any place in Boston.

Aug. 25.

eoptf.

MEDICAL INSTRUCTION.

THE subscribers continue to receive and instruct Medical Pupils upon the terms formerly announced.

The Pupils are admitted to the medical and surgical Practice of the Massachusetts General Hospital, and receive private instruction from the subscribers.

JAMES JACKSON,
WALTER CHANNING.

For terms, apply to Dr. Channing, Tremont street, opposite Tremont House.

CARTER & HENDEE have just published,—The Constitution of Man, considered in Relation to External Objects. By GEORGE COMBE.

From the Preface to the American edition.

“Mr. Combe's work should be placed with those, of which so many within a few years have appeared, which are devoted to the all-absorbing topic of Education. It treats of moral, intellectual, and physical education. This is not formally done under so many distinct heads. But the whole course of reasoning of the author, and the whole array of all his illustrations, have it always obviously in view to show how the highest cultivation of each of these may be most surely brought about.

“The publishers have printed this edition from a belief that there is much in the work to interest the community.

“It has a novelty to reward the general inquirer, and it presents the well known under novel aspects. There is one class amongst us who may study it with much advantage. Scholars are referred to, a class here too small to form a distinct order with habits of their own, and who insensibly fall into those which, although not mischievous, to the multitude on the score of health, too often make ill health the portion of the sedentary student, and bring upon him premature decay.—To all classes it is recommended, and the various learning and acuteness of the author well fit him to write a book which addresses its instructions to the whole community.” Sept. 8.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

THE BOSTON
MEDICAL AND SURGICAL JOURNAL.

Vol. II.]

TUESDAY, OCTOBER 13, 1829.

[No. 35.]

I.
BELLADONNA.

Its preservative Power against Scarlatina.

By Drs. TAYNTON and WILLIAMS.

DURING the months of April and May the scarlet fever was very prevalent in this town and neighborhood, and in many cases it proved fatal. Our attention was called by a friend to a notice in the *Lancet* of the 2d of May, "on the prophylactic powers of belladonna against scarlet fever, by Hufeland."

We were at that time attending in a boarding-school, where the disease had attacked twelve of the boys, many of whom had been most dangerously ill, but none had died. There still remained several boys (perhaps twenty) who had not taken the infection; also four young children of the master's, and several servants.

We immediately commenced the use of the belladonna, in the exact manner and dose advised by Hufeland. Only six or seven persons in the house took the disease afterwards, and in every instance it assumed the mildest form.

In another small school we were called to visit a child about two years old, who had been attacked the evening before. The disease was of the most malignant character, and the child died on the following morning, the third day from the attack.

The house is a very small one. There were in it three other young children and five boarders, and a servant girl. The belladonna was faithfully administered, and not one individual took the disease.

We will not offer any conjecture on the *modus operandi* of the belladonna, or whether it did or did not prevent the other members of these families from taking the disease. The facts are stated exactly as they occurred, and we entreat our medical brethren to make trial of the belladonna whenever a favorable opportunity offers.

The following is the manner of giving the medicine:—Three grains of extract of belladonna dissolved in three ounces of proof spirit. Of this solution as many drops are to be taken as the patient is years old, twice a day.

As our readers may not be fully aware of the circumstances alluded to in the above paper, we subjoin some observations on this subject, made by Professor Koreff, in a letter to the late M. Laennec, published in the *Bulletin des Sciences Medicales*:—

"Observation clearly proves," says he, "that the belladonna, taken for some time, either in powder or in extract, produces, especially in infants, a redness of the skin, which is sometimes transient, but at others more durable; dryness of the mouth, with a sense

of heat in the throat; dilatation of the pupil; anxiety; and occasionally swelling of the sub-maxillary glands: symptoms having a great resemblance to those which accompany the eruption of scarlatina. The effect of the belladonna has also this in common with scarlatina, that neither of them produce the redness of the skin invariably, whilst the symptoms about the throat are always present. I confess to you, however, that all these analogies did not appear to me sufficiently strong to persuade me that in this plant was really to be found a preservative against scarlatina, similar to that which the cowpock affords against variola. It was not till I had received the authority of the celebrated Soemmering, who informed me that he had obtained the most satisfactory results with it when the disease raged epidemically, that I determined to employ it. This malady, accompanied by the most unfavorable symptoms, and having entirely changed its usual character, was at that time producing ravages almost as fatal as the contagious typhus. I then, for the first time, had the happiness to protect from this dreadful contagion almost all those who took the belladonna with a little perseverance, and of these there were many thousands. Since that time I have never lost sight of this discovery, which becomes the more valuable as the scarlatina has increased during the last thirty years, both in violence and extent, in many countries; and I have always found the same effects in different climates, and in epidemics of opposite characters. Many other physicians have equally confirmed the preventive powers of this plant, and the German journals are daily filled with proofs of a benefit which, with respect to some

countries, equals that of vaccination. In France, the capital and the provinces of which appear less subject to these fatal epidemics than Germany, Switzerland, the Tyrol, Poland, and the north in general, less attention has been given to this discovery, and it has been rejected, it must be said, too lightly, and without any sufficient examination, as may be seen in the article *Belladonna* in the *Dictionnaire des Sciences Medicales*. I only remember a single observation on this important subject, by Dr. Meglin,* who gives an account of a trial which he gave to this preservative during an epidemic of scarlatina at Colmar, and which confirms all the assertions of the German physicians. The absence of present danger is, perhaps, the cause of this indifference towards a discovery, which, important in itself, might also be fruitful in results applicable to other diseases. At present, however, I shall confine myself to an account of the results which have been ascertained (by repeated observations, and by a great number of individuals placed in very different circumstances), without incurring the reproach of having proceeded in a manner not sufficiently rigorous.

* * * * *

“The powder mixed with sugar, or the extract made very carefully from the juice of the recent plant, are employed after the following formulæ:—Extract of belladonna three grains, dissolved in an ounce of cinnamon water. Powder, or root of belladonna, two grains, mixed with drachms of white sugar, divided into sixty doses. From half a dose to a whole one is given to a child, from six months to two years old, four times a day;

* Nouveau Journal de Medecine, 1821.

to children from three to six years old, from a dose to one and a half ; to those from six to nine, two, to two and a half ; to those from ten to twelve, three, to four and a half. Of the solution, a drop is given for every year of the child's age, once a day and fasting. Observation has shown that, when the epidemic is very fatal, or the intercourse with the patients very frequent and intimate, it is prudent to increase the dose a little. It has not yet been possible to determine, in a satisfactory manner, the length of time which is necessary to eradicate, by this remedy, the susceptibility to the contagion. Everything leads us to believe that the remedy, if used during a time too short to ward off the contagion, moderates very much the malignity of the disease. We know for certain that the remedy does not permanently overcome the disposition to scarlatina ; and it is necessary to resume its use on every occurrence of an epidemic. We have always observed that the most intimate communication with the sick does not produce the disease, provided the medicine has been employed eight or nine times previous to being exposed to the contagion, and continued to the period of desquamation ; a circumstance important to nurses. It appears more certain to begin with rather strong doses in order to guard against the first impression of the contagion, and to diminish the quantity after a few days. No sensible effect has been observed to follow the continued use of this small quantity of belladonna. Up to the present time, neither season nor locality, nor any other circumstance, has appeared to diminish the preservative effect of this plant. * * *

"Do not believe, my learned colleague, that these results have

been too lightly deduced; or from a small number of individuals, or from epidemics of little violence. It is from entire provinces,—from cities affected with this terrible scourge,—from epidemics the most fatal, in all seasons, and in localities the most diversified,—on individuals of every age and of every condition, that observations have been made with the greatest accuracy, and have led to the above results."—*Lon. Med. Gaz.*

II.

OPERATION OF MORPHINE.

*Experiments on the Operation of Morphine on the Human Body in a state of Health.**

It is now some twenty years since a talented physician, still practising in the modern Athens, was quizzed a little in consequence of entertaining a number of his brethren, once or twice a week, —not with tea and cards,—but with tincture of digitalis ! The parties assembled and commenced the beverage, each keeping a finger on the pulse of his neighbor, in order to determine the physiological operation of foxglove. The result is well known. Digitalis was proved by *direct experiment* to be a strong stimulant; although since that period the profession has doggedly adhered to the vulgar opinion that the drug is a sedative, and employ it accordingly. A somewhat similar party was lately formed at Turin, consisting of Messrs. Beraudi, Rebrini, Crispo, and Allinio, for the purpose of taking the acetate of morphia, and thus ascertaining its effects on people in health. These four

* We alluded to these experiments in a former No. This more minute history of them is from the *Med.-Chirur. Review*.

gentlemen met on the 28th of September last, having previously dined, and commenced their experiments.—At three o'clock, M. Allinio, aged 22 years, of bilious temperament, and whose pulse was at 66, swallowed an eighth of a grain of the acetate in some distilled water. He had scarcely taken the medicine when he felt a bitter and somewhat acrid taste in the back part of the throat. In five minutes there was severe pain in the epigastrium, and propensity to sleep, with somewhat laborious breathing. At the end of twenty-five minutes the same phenomena continued. At thirty minutes there was profuse perspiration, with dilated pupils, and pulse at 94. At thirty-three minutes there was heavy drowsiness, with pain about the frontal sinuses. At fifty minutes the lips were livid, the face flushed, the conjunctivæ injected, severe pain in the frontal bone. At fifty-two minutes, pains in the bladder, physiognomy stupid, eyes sparkling, urgent thirst, sense of extreme lassitude in the inferior extremities. At a quarter past four o'clock there was pruritis of the skin, continual pains in the genito-urinary organs, and weight in the forehead. These symptoms continued till nearly seven o'clock, when severe pain in the epigastrium was followed by vomiting. No sleep took place till two o'clock the next morning, when the experimenter fell into profound repose till six, when he awoke with obtuse pain in the head, and soon afterwards had two alvine evacuations.

The other three gentlemen took the acetate, some in larger and some in smaller doses, at the same hour. Two of them were

affected in a manner not particularly different from that already described. One of them, however, experienced very little else than an acceleration of the pulse to 108 in the minute. In the course of a couple of days the experiments were repeated, but on an empty stomach. The symptoms were not precisely those which followed the medicine taken after food, but yet they were not materially different, and need not be detailed. The experiments were afterwards repeated with still larger doses of the medicine, and a corresponding degree of intensity in the symptoms.—We are not aware that much useful information is to be collected from these experiments. The Northern digitalis-sippers came to the conclusion that foxglove was a stimulant;—if we may judge by the symptoms above described, the Italian morphiue-eaters have a fair right to infer that morphine is an irritant; for certainly its effects were anything but soothing.

One thing we would hint to our juvenile experimenters, namely, that medicines, when taken in health, produce very different effects from those which result from the same remedies taken in diseases.

III.

TREATMENT OF HOOPING COUGH.

Observations on the Treatment of Hooping Cough, and on the Use of Sulphate of Quinine in that Disease.

By a SURGEON.

THERE were sixteen children on board a ship returning from India, who became affected with hoop-

ing cough. There is nothing to remark in the history of the symptoms; but the account of the treatment is not destitute of interest.

"When unequivocal symptoms of the disease appeared, doses of ipecacuanha, according to the age of the patient, were given night and morning, so as to produce full vomiting. In the intervening time, a mixture of antimonial wine, laudanum, and sulphate of quinine, made into a draught with syrup and water, was given thrice a day, at intervals of five hours. The dose for a child of two years was three drops of the antimonial wine, one of laudanum, and half a grain of quinine. When the first, or contagious stage, was over, the quantity of the two former was diminished, while the latter was increased. Burgundy pitch plasters were applied to the breast, and between the scapulæ. The bowels were kept moderately open by calomel and rhubarb; the diet was light and nutritive. This treatment was generally successful in about a month.

"There was an interesting boy of three years who suffered extremely. The convulsive paroxysms were violent, and the quantity and tenacity of the mucus such as threatened suffocation. He was reduced to such a degree, that (to use his nurse's words) he was a 'mere bag of bones;' yet, by a steady perseverance in the above treatment, his recovery, though late, was yet complete. Several expedients to divert his attention, by play, toys, &c., were of use as auxiliaries. The quinine in the second stage was decidedly beneficial; and it is in this stage, where the disease is supposed to remain in the system merely from

the power of habit, that the exhibition of tonics, and above all the quinine, is indicated.

"I was induced to make trial of this medicine from the great approbation with which Dr. Cullen mentions the virtues of Peruvian bark in this disease. 'I consider the use of this medicine,' says he, 'as the most certain means of curing the disease in its second stage; and, when there has been little fever present, and a sufficient quantity of the bark given, it has seldom failed of soon putting an end to the disease.'* In the cases that came under my observation, there was little or no fever; and I should think, from the small bulk and the soluble nature of the quinine, that a sufficient quantity can be given, without the inconveniences attending the exhibition of the bark.

"I have said that the quinine, in the second stage, was decidedly beneficial: it certainly appeared to me so; yet, perhaps, I ought to qualify the expression. In estimating the effect produced on diseases by remedies, it is difficult to determine with precision the exact share which these have, apart from adventitious circumstances, in bringing about a favorable termination. In the present instance, the state of the atmosphere appeared to exercise considerable influence over the disease. During moist hazy weather, the expectoration was more copious and viscid, and difficult of separation. When the air was hot and dry, it was scanty, the cough more distressing, and in one or two instances streaked with blood. Between the tropics, and

* Cullen's Works, by Thomson, vol. ii. p. 463.

during the prevalence of the trade-winds, when the weather was fine and clear, it was particularly mild. How much we are to attribute to the state of the atmosphere, I know not: one thing, however, will, I think, be granted,—that the constant succession of climate that is experienced during an Indian voyage, will rather have a salutary than an injurious effect on the disease.

“Should the use of the quinine in hooping cough prove efficacious in the hands of other practitioners, I shall feel gratified. It deserves, at least, a fair trial; and it is exempt alike from danger and inconvenience.”—*Med. Gaz.*

IV.

DIETETIC REGIMEN IN FRANCE AND ENGLAND.

WHAT is ordinarily called the influence of climate on the human species, ought, in our opinion, to include the effects of the customary aliment which necessarily varies with the geographical situation of each country. Thus, in the north, the stomach calls for animal food and the excitation of spirituous liquors; (?) while, in southern regions, bread and fruit only are used, and irritating drinks studiously avoided. The French are more sober than the Germans, because the mild temperature of their country enables them to substitute wine for the beer or distilled liquors of their neighbors. Under the burning sun of the Spanish peninsula, oranges, citrons, and a multitude of other fruits, abounding in juice, attain a maturity unknown in France; and the refreshing and delicious drinks of Spain render the inhabitants still

more averse to the effects of spirituous stimuli, while at the same time they care less for wine.

Madame de Staël attributes the severe character of the gloomy mythology of the northern nations, to the perpetual fogs and rigorous winters of their climate, and she is perhaps right to a certain extent; but are not these distinctive traits rather the effect of that dulness of intellect so evident in those persons habitually accustomed to the use of violent excitants?

The inhabitants of the south are, on the contrary, gay, lively and witty, independent of external objects, and much more disposed than the inhabitants of the north, to seize upon the frivolous and transitory pleasures which at every moment are presented to them. The Frenchman always evinces a disposition to enter into a hundred trifling projects of pleasure, which the Englishman pretends to despise, while he secretly envies that pliancy of disposition which the climate of his own country denies him: haughty and impatient, he only loses his heaviness when *porter* has rendered him inconsiderate and querulous. The extraordinary differences which we observe in the manner of living among the modern European nations, have been principally produced by the use of tea, coffee, sugar and tobacco: their introduction into common use is one of the most singular conquests of commerce. Who would have supposed, three centuries ago, that the products of China and the West Indies would one day become the habitual aliment of the inhabitants and the servants even of the rustic population?

The following table, drawn up

from authentic documents, may explain, to a certain extent, the difference of manners observable between the two greatest nations of Europe :—

Quantity of Sugar, Tea, etc., annually consumed in Great Britain and France.

		England.	France.
Sugar	lbs.	448,000,000	128,000,000
Tea	"	22,750,000	195,000
Coffee	"	8,100,000	20,100,000
Tobacco	"	16,900,000	7,200,000
Wine	galls.	6,210,000	700,000,000
Spir. liquors	"	28,020,000	5,700,000
Beer	"	420,000,000	155,000,000

But to be able to draw conclusions, we give, as follows, the relation which the consumption bears to the population of each country.

		<i>For one million.</i>	
		English.	French.
Sugar	lbs.	22,400,000	4,270,000
Tea	"	1,137,000	6,500
Coffee	"	405,000	670,000
Tobacco	"	845,000	273,000
Wine	galls.	310,000	23,300,000
Liquors	"	21,000,000	5,170,000

We have selected and translated the preceding article from one of our French medical journals, as calculated to interest the general reader. We hope to be able, on a subsequent occasion, to present a sketch of the proportion of the above articles consumed in the United States, accompanied with such reflections as naturally pertain to the subject of regimen.

We republish the above from the Journal of Health, a new work recently got up at Philadelphia. The object of this publication is the *prevention* of disease. It is designed as a *popular* rather than strictly professional work, and the two numbers already issued give fair promise of a highly respectable accession to our periodical literature. We heartily

wish it all the support it merits, and hope it will be far more *useful* than such works generally are. People always like to read and repeat good rules for the preservation of health ; but after all their admiration, they seldom put them in practice. A celebrated English Surgeon, who is no less familiar with the moral than the physical constitution of man, was, and probably now is, in the habit of concluding his course of lectures on Hygiene with the remark, that he had not only preached up these rules in a lecture-room, but been in the habit of repeating them in his private practice for the last twenty years, and during the whole of that period he could not say that a single individual had ever been persuaded to follow them.

V.

LITHOTOMY A DEUX TEMPS.

I WAS present when Mr. Lizars, of Edinburgh, performed the operation of lithotomy in this town, during the present summer. It was speedily and simply done. One calculus, the size of a pigeon's egg, was easily removed; as soon as an opening had been made into the bladder ; when another was discovered, somewhat larger than the first, but owing to the firm contraction of the fibres of the wounded bladder, it could not be readily removed at the time, and Mr. Lizars put his patient to bed, assuring his medical friends that all further attempts to remove the calculus would only tend to bruise and irritate the bladder and adjacent parts, and render inflammation more liable to occur. He was confident, he stated, from

experience, that on the third day from the operation the calculus would be easily removed, with scarcely any pain to the patient. Accordingly, on the day appointed, those who were present at the operation were in attendance, and saw Mr. Lizars gently introduce his finger into the wound, while the patient lay in bed, and then, guiding a scoop along the finger, bring out the calculus, which was as large as a chicken's egg, with all the ease imaginable. The patient, a gentleman of sixty-four years of age, had a quick recovery.

Mr. Lizars speaks highly of leaving the calculus till the third day, when it cannot be readily extracted at the time of the operation. By that time the suppurative process has commenced, and all the parts concerned are quite relaxed. This is the method introduced by the French surgeon Franco, as the *opération à deux temps*, and which has been condemned by some of our modern writers. Mr. Samuel Cooper strongly reprobates the practice of putting a patient to bed with a stone in his bladder; and advises that, rather than do this, we should make an opening adequate to its abstraction; or if this cannot be done, he tells us to break down the calculus and remove its fragments. If the long and constant irritation of a calculus, or calculi, has the effect of thickening the coats of the bladder, and diminishing its capacity; and if the cutting into that viscus causes its fibres to contract, and firmly grasp the calculus, as the uterus does its placenta when about to throw it off,—both of which occurrences experience shows us to be almost invariable attendants

on the disease, and the operation for its removal,—then all reiterated and painful attempts to remove and break down the calculus will not only be improper, but must also tend greatly to endanger the life of the patient. The cases in which Mr. Lizars has tried this operation *à deux temps* have been attended with the greatest success, and he has removed, on the third day after the operation, very large calculi with the utmost ease. He has hitherto made one or two gentle endeavors to bring away the calculus at the time of the operation, but if he does not readily succeed, the patient is put to bed. So convinced is this expert operator of the superiority of this plan, that he declared to his medical brethren, at the operation I have just mentioned, that were it his misfortune to be obliged to submit to the operation of lithotomy, he would not suffer the forceps or scoop to be used before the third day.—*Gibson's Medical Sketch of Dumfries-shire.*

VI.

LIGATURE APPLIED TO THE AORTA.

The following case was communicated to a foreign Journal by Mr. J. H. James, a Surgeon at Exeter, England.

THE patient, a man aged 44, had an aneurism of the external iliac. The situation and size of the tumor seemed to preclude any attempt to tie it above; and I was induced to adopt the plan revived by Mr. Wardrop, of applying a ligature on the femoral below it. This was done on the 2d of June, and it was at first followed by a very sensible decrease in the tumor; but shortly the ground gain-

ed was again lost ; and after considerable further enlargement, it became evident that the process of sloughing was about to take place. Under these circumstances, the patient's situation was fully and explicitly stated to him ; and he, having judged that it was better to take the only chance that remained, than perish by bleeding ; his nearest relations also having given their full and deliberate assent, I performed the operation alluded to on the 5th of July, nearly in the situation in which it was done by Sir Astley Cooper. Much difficulty was experienced from the great and very embarrassing protrusion of the bowels. The ligature, nevertheless, was applied, but the patient died in the evening, having suffered extreme pain in the aneurismal limb from the time the ligature was drawn.

On examining the body, it was found that the ligature had been applied to the aorta without including or injuring any other part. It was also ascertained that the probable reason of the failure of the first operation arose from a cause that could not have been foreseen ; namely, that instead of the usual distribution of the arteries below, the external iliac, in this case, divided into two nearly equal trunks ; and although the artery corresponding to the femoralis superficialis had been correctly tied, the channel through the other remained open. The weight of the tumor was nearly four pounds. I shall only further add, that circumstances prevented me from performing the operation from the side of the abdomen, or from tying the common iliac, which I should have preferred, if practicable.

BOSTON, TUESDAY, OCTOBER 13, 1829.

MASS. MED. COMMUNICATIONS.

WE have before us Vol. IV., Part VI., of the Medical Communications to the Massachusetts Medical Society. The numbers and titles of the papers are as follows :—

VIII. *Memoir of Edw. Aug. Holyoke, M.D., &c.*—The memoirs of Dr. Holyoke contain, as might be expected, few facts of interest, except those connected with the great age to which his life was prolonged. Indeed they present, through their whole details, scarce any occurrence sufficiently remarkable to be here designated. From the early age at which he commenced practice to the

day of his death, Dr. H. appears to have kept the even tenor of his way, in the honest and faithful discharge of his duties as a citizen and a physician. The principal means which contributed to his longevity, according to his biographer, were a good constitution and a cheerful temper. Even his temperance, in the present sense of the term, does not appear to have been unusually rigid. He indulged moderately in the pleasures of the table, took his fruit before dinner and his wine afterward, chewed his pigtail and smoked his pipe, kept away indigestion by good spirits and exercise, and removed the ill effects of occasional excess by subsequent privation. The best lesson of

Dr. Holyoke's life is taught by the place which his multiplied years and uniform excellence of character and conduct, had gained for him in the affections of his friends and townsmen; and this lesson is one by which we may all profit. "Truly the gray head is a crown of glory, if it be found in the way of righteousness."

The post-mortem appearances were not remarkable; but those connected with the anticipations he had himself expressed during life, derive considerable interest from that circumstance. For several of the last years of his life, Dr. H. was induced, by various circumstances, to suspect the existence of effusion within his cranium. His theory with regard to it was, that the size of the brain had gradually diminished, and that the space thus left had been filled by a fluid secreted between the dura and pia mater. The following extract from the minutes of the dissection will show to what extent this opinion was correct, and afford a proof of the soundness of his judgment in advanced life, on a point, perhaps, as difficult as any other for a physician to decide,—the diagnosis of his own case.

"On dividing and turning back the scalp, which was very thin and delicate, not a single drop of blood flowed. Although the utmost care was taken in sawing the cranium, as soon as the saw penetrated the inner table a transparent fluid began to flow, and on removing the calvarium, it was found that the dura mater was adherent to the bone nearly throughout its whole extent,—an alteration which did not seem to depend on disease,—the distinction between the two tables of the cranium entirely

obliterated, and the texture of the bone more dense than common. The tunica arachnoides was very firm and opaque; the veins beneath it were very small, containing but little blood. The brain was very firm and dense, and the convolutions very strongly marked; the sulci were wide and deep. The color was somewhat darker than common, and the whole feeling and appearance of the brain was as if it had been subjected to the action of alcohol. A small quantity of serous fluid was found beneath the tunica arachnoides. The cortical portion of the brain was extremely thin, being less than an eighth of an inch in thickness. In the ventricles nothing unusual was discovered. The pineal gland was extremely small, and contained no particle of gritty matter. The cerebellum was thought to be disproportionately small."

IX. *Dissertation on Intemperance, —to which was awarded the Premium offered by the Massachusetts Medical Society,—by WILLIAM SWEETSER, M.D.*—Dr. S. has considered very fully the effect of intemperance in the use of ardent spirits on the various organs and their functions. He examines the much agitated question as to the safety of omitting a stimulus of this kind after the system has been accustomed to its influence; and concludes that the cases are very rare in which any danger is to be apprehended from the change. Dr. S. reprobates the idea that intemperance arises out of physical malady, and is the means suggested by nature for its relief. No consideration of this kind should be admitted to lessen its moral tendency, or the disgrace and infamy with which we are wont to associate this degrading indulgence.

X. Observations on Abortion. By **E. HALE, jr., M.D.**—Dr. Hale remarks on the doubt which is often felt by the practitioner when called to a case of threatened abortion, to what extent treatment may be employed to prevent its occurrence, and at what stage of the process such treatment becomes useless and injurious. The practice adopted in this state of uncertainty, is of course likely to be vacillating. He quotes a remark of Denman, that in many cases where abortion has taken place, the *foetus* has been found, on examination, depraved in its structure, or otherwise unfit to come to maturity ; and it may be presumed that in most cases where this process takes place spontaneously, the uterus is unfit to afford, or the *foetus* to receive, the requisite support. In such cases it is obviously useless to interfere when the process has commenced. But such a state of things may be brought about by an improper mode of living, and may be kept up by habit ; and the province of judicious treatment is to prevent their recurrence by measures adopted in due season. Other causes, as various accidents, render immediate and active interference necessary. On the whole, however, the common error is to be found in pushing the preventive system too far, and continuing it longer than circumstances will justify. This observation is illustrated by a curious case, the details of which present several points of great interest.

By subject of this memoir lived to the age of 66 years, and enjoyed not only a large share of professional practice in Deerfield, but the unabated respect and attachment of those with whom he was connected in the various occupations of life.

Dr. Williams was one of those physicians who studied medicine in the way most calculated to make his knowledge practically useful. After attending a number of cases in the day, he investigated, and made himself master of what others had known of such cases, in his retired hours of study. Thus did his practice and his reading come in direct aid of each other, as the diagram and the demonstration in a geometrical theorem.

His opinion on the subject of *depletion* may be gathered from the following extract :—

“ In acute diseases he bled with a bold and liberal hand, though he never could agree with many of his contemporaries in abstracting blood in the advanced stages of phthisis pulmonalis, and in many chronic complaints. He believed that the modern depleting practice, in such cases, was annually destroying thousands.”

XII. Observations on the Nature and Treatment of Cynanche Trachealis, by **CHAS. MACOMBER.**—Dr. M. has found great benefit, in cases of croup, from minute doses of calomel, given very frequently in some adhesive substance, so that the throat may be almost constantly lined with it. In this way he thinks the false membrane may be prevented from forming, or if formed, may be rendered less irritating. In the author's opinion, this remedy may be safely

XI. Memoir of William S. Williams, M.D. By **STEPHEN W. WILLIAMS, M.D.**—The distinguished sub-

trusted to without aid from blisters or sanguineous depletion.

XIII. Operation for Emphyma Encystis Steatoma, by JOHN C. WARREN, M.D. *With a Lithographic Print.*—This tumor is said to have been situated on the right cheek, though, we know not for what reason, the engraver has thought proper to place it on the *left*. Its weight is not mentioned. It was successfully extirpated by Dr. Warren.

ACTION OF POISONS ON THE LIVING BODY.

It is a question of some interest, in a physiological view, whether poisons introduced into the system affect the brain through the medium of the circulation, or more directly by taking the course of the nerves leading from the part to which the poisonous substance is applied. The second of these opinions derives considerable support from the researches of Messrs. Morgan and Addison, of Guy's Hospital, London, who have jointly performed several experiments with a view to determine this point.—A history of these experiments and arguments is given in the *Edinburgh Journal*; and we propose to offer the reader some account of these, with such remarks as may be suggested.

The first and most general of these arguments is derived from the fact, that external applications to the nervous extremities, incapable, from their nature, of affecting the mass of blood, produce effects strikingly similar to those of poisonous agents. Such are extensive burns of the integument, which produce a comatose state, and gun-shot and other wounds,

which are followed by tetanus. As it must be supposed that these injuries act on the sentient extremities of the nerves, and that the impression is thence conveyed to the brain, a similar process may be supposed to occur when poisonous agents have been introduced into any part of the body, where they come in contact with like nervous extremities.

Another argument in favor of this theory, is derived from the very short space of time required for the more powerful poisons to produce their effects. Strychnia, when introduced by an external wound, has been known to act in fifteen seconds, a period apparently too short for the system to be affected through the medium of the circulation. If then, in this and similar instances, the effect is admitted to be produced by the intervention of the nerves, it is most conformable to the simplicity of nature to suppose that the medium is the same in other cases, whatever the interval required for the development of the poison.

But the most conclusive arguments in favor of nervous transmission, are derived, by Messrs. M. and A., from the results of their own experiments. If a poison acts by being carried in the blood to the brain, it ought to exert its effect much sooner on the arteries than the veins, and on the arteries above the heart than those below. That this is not the fact, was shown by introducing a powerful poison successively into the jugular vein of an animal, and its carotid and femoral arteries. The time required for the substance used to produce its effects, was found, in these

successive trials, to be nearly the same. A still more conclusive experiment on this point, was made by transmitting the blood of a poisoned animal through the artery of another. A communication was established between the right carotid of one dog, and the left of another; which was effected by dividing both vessels, and inserting the lower end of each in the upper end of the opposite. Nux vomica was then introduced into a wound in the back of one only. The inoculated animal was affected with tetanus in three minutes and a half, and died in four minutes more; while the other was never affected at all. Yet the blood of the former must have flowed into the artery of the latter; and the inference seems inevitable that the poison did not enter into the circulation.

It is a singular fact, and one which shows the difficulty attending these researches, that three distinguished physiologists should have separately performed experiments with a view to the solution of this very question, and have all arrived at a conclusion precisely opposite to the one just stated. Mr. BRODIE found that when the leg of an animal was firmly bound by a ligature, the sciatic nerve only being excluded, the effects of a powerful poison applied to a wound of the foot, were not experienced until the ligature was again loosened, so as to restore the circulation of the limb. The great experiment of MAGENDIE consisted in applying poison to the amputated limb of an animal, the circulation being kept up through the separated orifices of the artery and vein connected together

by quills. The *spas* was introduced into a wound of the limb so prepared, and produced its effects in the usual time. And lastly, when Dr. BARRY applied cupping-glasses over a poisoned wound, the progress of the symptoms was arrested, although the animal was previously about expiring; a result which was naturally explained by supposing the process of absorption to have been interrupted, and the poison prevented from passing into the circulating fluid.

But Messrs. Morgan and Addison are by no means disposed to admit the conclusion, which these experiments so obviously suggest. To Mr. Brodie's experiment it is objected, first, that the want of circulation in the limb may have impaired the functions of the nerve itself; and secondly, that the nerves of sensation may possibly not be the same nerves which transmit the poisonous influence to the brain. The experiment of Magendie confessedly proves that poison may be conveyed in the circulating fluid; but it proves nothing more; for as soon as the blood has passed the artificial portion of the tube, the sentient extremities of the nerves, on the interior of the next portion, are ready to receive an impression, and to convey it with all despatch to the encephalon. Lastly, the effect of the cupping-glasses, which Dr. Barry supposes to have interrupted the process of absorption, may have been only to paralyse the sentient extremities of the nerves, and thus interfere with their function of carrying the morbid influence to the brain.

It must be confessed that these

pros and cons,—this array of conflicting facts and contradictory conclusions,—are calculated to produce in the reader no small degree of perplexity ; and to propose any theory which shall reconcile all these apparent contradictions, is no very easy task. Non nostrum tantas componere lites. Perhaps, however, the amount of absolute demonstration, on either side, is less than it would at first appear. The strongest direct evidence which is adduced, may be found in the experiment of the amputated limb on the one side, and that of the double union of the carotids on the other. To the former of these, Messrs. M. and A. answer, that when the blood has passed through the artificial tube, the impression is received by the nerves above and conveyed to the brain. This suggestion, while it does not impair the force of Magendie's experiment, really casts a shade of doubt on their own ; for if it were so, a similar effect ought to take place in the artery of the animal receiving the noxious blood from the other ; and they must still account, on their own theory, for the fact of the animal in question remaining unaffected.

Waving this objection, however, and with it excluding all doubt as to the former experiment, the latter still falls short of being absolutely conclusive. It seems impossible that the blood should have passed through the mutilated extremities of the vessels on one side, with the same facility that it traversed the perfect artery on the other ; nor, having done so, is it certain that being formed in the vessels of one animal, it ought to

have a like relation to the sensibility of the cerebrum in both. Admitting, however, all that the above experiment is intended to prove, namely, that the action of poison is occasionally conveyed independently of the circulation, to what other vehicle are we to refer its transmission ? The means of communication pointed out by our authors are the nerves ; not, however, those of sensation and motion, but another set provided particularly for this purpose, and communicating from all parts of the body directly with the brain, without the intervention of the spinal marrow. This liberal addition to the human structure, for such it seems to be, certainly detracts something from the simplicity of the theory, and is rather at variance with that singleness of contrivance in nature's works, which they are elsewhere disposed to regard as one of their chief beauties. The experiment which appears to have suggested this theory, and in which a poisonous substance acted in its usual time, notwithstanding the previous division of the spinal marrow, proves either that the effect was produced by absorption, or that the *modus operandi* is unknown to us. The supposition of a peculiar structure, by which the impression was conveyed to the brain, is just equivalent to the latter alternative.

If then poisonous substances affect the system through any medium except that of the circulation, the nerves seem to offer themselves as by far the most probable avenue ; and this supposition is confirmed, as is remarked by our authors, by the effect of mechanical and chemical agents in pro-

ducing tetanus and coma. In what proportion of cases the nerves transmit the poisonous influence, and whether the two modes often exist conjointly, are points not easy to decide. Where the effect is produced with great rapidity, it seems most natural to attribute its transmission to the nerves; but it is difficult, on the one hand, to say what is the shortest period sufficient for the process of absorption to take place, or on the other, to explain why the effect, if conveyed by the sentient nerves, should not, like the sensations themselves, be absolutely instantaneous.—The subject altogether is a curious one, and we hope to be able to report to our readers more ample results from its future investigation.

EXTIRPATION OF THE UTERUS.

THIS operation has been recently performed by a French Surgeon, M. Racimer. After the entire organ had passed from the patient into the hand of the operator, the epiploon appeared at the gap; on being pushed back, however, it retained its proper place. There was little hemorrhage, and this was arrested by a few ligatures. The operation, performed with the utmost coolness, occupied but twenty minutes. A convex blunt-pointed bistoury was the cutting instrument

used by the Surgeon; and at the date of the report, three days after the operation, the patient was doing well. The pain is said not to have exceeded that of an ordinary labor.

Debility of the Rectum.—A diminution of the power in the muscles which act on the rectum in expelling the fæces, is a complaint of very common occurrence, and being attended with the symptoms of *Stricture of the Rectum*, it is frequently mistaken for it. Several cases of this kind have lately come under our notice.—*Med. Gaz.*

Prussic Acid.—This article, rectified from calcined sulphate of zinc, has been found by M. Schütz to retain its qualities 3½ years.

Premium.—The Editor of this paper is authorized, by a friend to the young men of our country, to give notice that a Premium of Fifty Dollars will be given for the best Essay, addressed to the young men of our Colleges and professional Seminaries, dissuading them from the use of wine, spirits and tobacco; the Essays to be examined and the Premium awarded by Rev. Drs. Woods, Edwards, and Cornelius, of Andover, Dr. J. C. Warren, of Boston, and Professor Silliman, Yale College, New Haven. The Essays must be sent, free of postage, to the Editor of the *Journal of Humanity*, Andover, Mass., by the 1st of January, 1830; each Essay to be accompanied with the name of the author, under seal.—*Journal of Humanity.*

WEEKLY REPORT OF DEATHS IN BOSTON, ENDING OCTOBER 2.

Date.	Sex.	Age.	Disease.	Date.	Sex.	Age.	Disease.
S. 25.	M.	61 yrs	liver complaint		M.	12	dropsy in the head
	F.	34	apoplexy		F.	12	do.
26.	F.	12 mo	hooping cough		F.	16 yrs	cholera
27.	M.	12	canker in the bowels		M.	12 mo	measles
	F.	43 yrs	consumption	30.	F.	23	dysentery
28.	M.	42	typhous fever		F.	9 yrs	typhous fever
	F.	42	cancer		M.	22	dysentery
	M.	6 mo	measles	O. 1.	M.	35 yrs	unknown
	M.	24 yrs	chronic diarrhoea		F.	10 mo	marasmus
	F.	2	consumption	2.	M.	15 d	
29.	M.	20 d	unknown		F.	35	dropsy
	M.	80 yrs	old age				
	M.	14 mo	dropsy in the head				

Males, 18—females, 11. Total, 24.

ADVERTISEMENTS.

ANATOMICO-SURGICAL DRAWINGS, and Descriptions of all the Surgical Operations, according to the most approved methods. By L. J. VON BIEBKOWSKY. Translated from the German. In two volumes, and 570 drawings on 58 folio plates.

EXTRACTS FROM THE PROSPECTUS.

"Encouraged by the approbation of the Medical Profession, it is proposed to publish a work under the present title."

"This work contains 570 drawings, on 58 plates folio; to which is annexed, in two volumes 8vo. a concise explanation of each surgical operation. The plates exhibit not only the parts interested in operations, in their natural position and size, but, what is much more important, represent the different acts or stages of the whole operation, while others exhibit delineations of such morbid affections as consist in the change of the natural position, structure, color, &c. In order to afford the work at a moderate price, the plates will be Lithographic; and for the purpose of securing perfect accuracy, engagements have been entered into for their preparation in Berlin, under the especial direction of two of the most distinguished Professors of the University of that city."

A specimen of the translation, and the plates, is deposited for inspection at the Bookstore of CARTER & HENDEE, who receive subscriptions for the work.

Subscribers will be furnished with the work, and the first impressions of the plates, at the price of \$30.

The subscription list will be open until the 1st of November, 1829, after which period the price of the work will be raised to \$40.

P. S. For the accommodation of subscribers the work will be issued in five Numbers, at \$6 each, payable on delivery. Sept. 29. 18202N1D.

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"COPAIVA may be given in this form without the least inconvenience. Neither communicating taste, nor imparting odor to the breath, it is also retained without the least disquietude or uneasiness to the stomach; and I am informed by Dr. Rousseau, that in large doses it does not purge."—*Phil. Journal of Med. Sciences.*

See an article in this Journal, Aug. 18th.

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Aug. 25.

eo3ptf.

CARTER & HENDEE have just published,—The Constitution of Man, considered in Relation to External Objects. By GEORGE COMBE.

From the Preface to the American edition.

"Mr. Combe's work should be placed with those, of which so many within a few years have appeared, which are devoted to the all-absorbing topic of Education. It treats of moral, intellectual, and physical education. This is not formally done under so many distinct heads. But the whole course of reasoning of the author, and the whole array of all his illustrations, have it always obviously in view to show how the highest cultivation of each of these may be most surely brought about.

"The publishers have printed this edition from a belief that there is much in the work to interest the community."

"It has a novelty to reward the general inquirer, and it presents the well known amongst us who may study it with much advantage. Scholars are referred to, a class here too small to form a distinct order with habits of their own, and who insensibly fall into those which, although not mischievous, to the multitude on the score of health, too often make ill health the portion of the sedentary student, and bring upon him premature decay.—To all classes it is recommended, and the various learning and acuteness of the author well fit him to write a book which addresses its instructions to the whole community." Sept. 8.

A TREATISE on the Scrofulous Disease, by C. G. HUFELAND, Physician to the King of Prussia, &c., translated from the French of M. Bousquet, by Charles D. Meigs, M.D., is just received and for sale by CARTER & HENDEE.

Sept. 8.

Published weekly, by JOHN CORRON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, postpaid.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

THE BOSTON
MEDICAL AND SURGICAL JOURNAL.

Vol. II.]

TUESDAY, NOVEMBER 10, 1829.

[No. 39.]

I.

OBSERVATIONS ON OBLITERATION OF
THE VAGINA.

By CÆSAR HAWKINS, Esq., Surgeon to
St. George's Hospital.

CATHARINE H., æt. 27, admitted for amenorrhœa, with the following history:—In November last she was delivered of her first child, which was stillborn, by means of instruments. She suffered much during her confinement, and was very ill for some time afterwards, but recovered her health during the month. About a month after her confinement, she had the usual precursory symptoms of menstruation, but no discharge of the secretion took place; and each month since that time (the last being the sixth period since her confinement) the symptoms have returned with increased severity at each successive period. She has much pain in the hips and loins, pain and bearing down in the vagina, sickness, slight febrile symptoms, with general disturbance of health. The abdomen swells, and is tender and painful, and she suffers much from flatulence, and experiences considerable difficulty in emptying the bladder or rectum, though there has been more or less difficulty in passing either evacuation, even during the intervals between the periods of menstruation. These symptoms continue for nine or ten days, and then subside, leaving her

comparatively well. The abdomen, however, has not lately recovered its proper size upon the subsidence of the other symptoms, but remains considerably swollen, though less than during the menstrual periods. She did not suffer much after her confinement from the lacteal secretion, but has been constantly obliged to use liniments to the breasts, as, at each menstrual period, the breasts enlarge and become painful, and milk is secreted in such quantity as to escape from the nipples even without pressure.

At the request of Dr. Seymour, under whose care she was admitted, I examined her, and found the vagina totally obstructed by a very firm membrane, drawn in and puckered towards the centre, and feeling like cartilage. On passing a catheter into the bladder, the urethra was perceived to be pushed up behind the pubes as if by pressure, so as to require the point of the instrument to be turned nearly perpendicularly, instead of in the usual oblique direction. When the water was drawn off, a firm tumor could be distinguished by pressure on the abdomen, and a considerable prominence could also be felt by the finger introduced into the rectum beyond the point of obstruction, though no distinct sensation of fluctuation could be felt either at the obstructed point or on the abdomen, nor in the rectum.

for it was almost impossible to get him to take anything: I had to force his mouth open with a knife-handle every time I gave anything, to the serious injury of his teeth, so determined was he to take nothing.

I was in a few days called to several cases. Two were in one family. One, a white child of light complexion and very fat, died in twelve hours after the disease was first discovered. I concluded I would give the red pepper tea, salt and vinegar a fair trial: I accordingly directed it to be made very strong, and a tablespoonful given every hour, the dose to be augmented if the child did not swallow the whole of it, and, where the case was very bad, to be given every half hour. At the same time I directed a dose of calomel, and kept the bowels open afterwards with rhubarb and salt of tartar. After this I scarcely lost a case. Sometimes, where I was afraid of the purgative effects of calomel, I used a spirituous solution of corrosive sublimate, as an alterative; and although I have been frequently prevailed on to use other remedies, I have never found any that I could rely upon but the red pepper, &c., and the calomel, rhubarb and salt of tartar.

While I was attending to a case of fever, some time since, a young gentleman in the house informed me, that in the night he was taken with a fever and a kind of dryness in his throat. On examination, I found, in the upper part of the pharynx, a large black ulcer. I directed him to take a small wine-glassful of the infusion of red pepper, &c., every half hour, with a dose of salts; and in eight hours, when I returned, I examined the ulcer; it had lost its slough and

looked red, and it got well in a few days. I have seen a great many cases where, after the sloughs began to come off, they would be coughed up in bits as large as a man's thumb; and in some cases it would be six months before the child could articulate distinctly. I have been called in consultation several times, and every case that was blistered before I saw it, terminated fatally, the blister turning black with the ulcers. In many of the cases that I have seen, there has been some pustule containing matter, sometimes on the under lip or chin, sometimes on the hands; and one can tell the color of the ulcer by the color of that, as well as by examining the throat. In children that are very fat, of light or sandy complexion, the disease runs its course very rapidly, and is more apt to be fatal. I have seen many cases lost by parents and physicians supposing it to be croup, and using emetics too long. I have seen many cases where the child would run about, and not appear, to a common observer, to be ill until a few minutes before death. It generally goes through the family of children. I think that in white children it is more fatal than among black. Since my son died, which has been seven years, my children have been remarkably subject to it; my wife says we have had upwards of twenty cases, some of them very bad, in our own family.

I generally direct ten or twelve pods of red pepper to be cut and put into a pint cup, and enough hot water poured on them to fill the cup half full; let it stand a few minutes, then add a tablespoon heaped full of salt, and fill up the cup with strong vinegar. There are sometimes cases where the

throat is much swelled on the outside ; in those cases I have found it best to repeat the calomel more frequently ; and I have frequently given emetics of blue vitriol with advantage. I prefer calomel in small doses ; for every case that I have met with, where purgatives or emetics have been used extensively, has proved fatal. Since the first season that this disease prevailed in this country, it has been quite common every year, but was scarcely known before.

II.

LITHOTRITY.

The Editor of the London Medical Gazette has given his readers a circumstantial history of the Lithotritic process, which is now practised by many of the ablest Surgeons in Europe.—The following remarks are extracted from this history :—

A SHORT review of the history of this process may not be uninteresting : its origin is curious. It is not one of those valuable accessions to science and the public good, resulting, like those of Watt or Davy, from direct reasoning, or a wise adaptation of means to the end ; nor was it immediately hit upon by a lucky accident. It occupied no portion of the thoughts even of its inventor, when he began the course of experiments which eventually terminated in its contrivance. His first design was to destroy the stone by a re-agent,—a plan which had often before been attempted without success ; but in endeavoring to accomplish his purpose, two difficulties arrested him : first, the danger of injuring the bladder by the chemical solvents which he should employ ; and, second, his

ignorance of the chemical composition of the material on which he was to act. In order to overcome the former, M. Civiale thought of introducing a purse into the bladder, by means of a tube, through which, on securing the stone in the purse, he was to pour in his powerful solvents. But where was such a purse to be had ? It should be as wonderful in its properties as that of Fortunatus,—it should be fine and flexible, and delicate and capacious : and, at the same time, perfectly proof against strong chemical agents. Here was a difficulty indeed ;—no substance in the animal, vegetable or mineral kingdom, seemed adequate to the purpose, and the project was consequently abandoned. Yet the artist was not discouraged by his failure : fortunately he proceeded to combat with the second obstacle. As it was requisite to procure a specimen of the stone, it was obviously necessary to introduce some instrument that should break off a portion of it, without wounding the bladder. Having reason to think that it was not impossible to pass a *straight* sound, four lines or more in diameter, through the urethra, he made repeated trials, and ultimately convinced himself that it was perfectly practicable. On this principle his earliest instruments were constructed.

It is curious to observe that M. Civiale all this time never entertained any other object in his experiments, than simply to procure the specimen for which he was so anxious ; and that the idea of lithotritry, or grinding the stone to pieces, did not once occur to him, until he found himself obliged to give up his favorite project of the purse.

We need not enter into a detail

of the successive changes and improvements which the ingenious inventor adopted in bringing his instruments to their present state of comparative simplicity and perfection; we shall merely observe that the six elastic branches originally employed are now reduced to three, and that the *lithotriteur*, or perforator, in all ordinary cases, is armed with teeth, which are set to work on the calculus by means of a drill. In ten or fifteen minutes an expert operator demolishes a stone of the common size,—that is to say, one of about 18 or 20 lines in diameter.

One very obvious advantage of the new method we must not pass unnoticed. It is well known that persons afflicted with calculus, alarmed at the danger of being cut, procrastinate and put off the evil day, and endure, for years together, the most exquisite torture, rather than submit to the knife; while the stone, meantime, is acquiring additional bulk and complexity of character. All this, we suspect, will be materially altered when the new process comes to be better known: patients will have recourse to it in an earlier stage of the complaint, and their cure will, of course, be proportionably easy.

The objections made to this method are met by the following answers:—1. The introduction of *straight sounds* is no longer debatable: experience, both ancient and modern, has proved it practicable beyond a question; and it is demonstrable *a priori* from a knowledge of the structure and direction of the urethra.* 2. The expansive property of that

passage very soon permits the introduction of straight tubes,—three, four, or even five lines in diameter. 3. The pain is, in general, very inconsiderable; and where it proves severe, this is dependent on disease of the bladder or neighboring parts: nervous excitement there may certainly be in many cases; but if these objections have any force against *lithotrity*, they apply still more strongly to *lithotomy*. 4. The treatment is not tedious; and even if it were, perhaps many would think it preferable to be under the hands of a lithotritist for two months, than for two minutes under the knife of the most expert lithotomist. 5. On the supposition that the operator is competent (as should always be supposed in every operation), there is no *danger* in the process of *lithotrity*: an awkward operator, indeed, might do mischief through a want of address; but the same objection might be made even to phlebotomy itself, which in unskilful hands has been productive, as every body knows, of very grievous consequences. Nor is there better ground for other objections, such as alleged chronic inflammations of the urethra or bladder, &c., leaving behind pieces of stone, or other calculi untouched: such charges should be matter for testimony, but they have never been supported by either facts or experience.

Le Roy, Heurteloup, Amussat, and others, have, from time to time, suggested alterations and additions, by way of improvement, in the lithotritic apparatus; but the instruments employed by Civiale appear to us to be the most simple, and we are great admirers of simplicity in the construc-

* See Amussat's Memoir on the practicability of effacing the curvature of the urethra by straight sounds.

tion of surgical apparatus. The march of improvement, it may be observed, has ever been from what is more complicated to what is less so;—nature herself is the mother of simplicity.

In conclusion, we think our readers will agree with us, that the ingenious contrivance of M. Civiale is deserving of approbation. Our French friends, in the characteristic style of compliment, have pronounced it '*glorieuse pour la chirurgie Française, honorable pour son auteur, et consonante pour l'humanité.*' It may be equally characteristic (perhaps national) in us, not to be dazzled with the glory of the invention; but we are not, at the same time, blind to its merits. With all due respect for the Academy of Sciences, and for the names of Chaussier and Percy, we cannot elevate ourselves to raptures. We are, in plain terms, disposed to qualify our meed of praise from the consideration of one or two circumstances. It is to be observed, in the first instance, that the lithotritic process is available in none but cases in which the stone does not exceed a certain bulk; and this is allowing much, as, in fact, it is admitting it to be available in all ordinary cases. Its machinery, however, is so complicated, compared with the simple instruments commonly employed in lithotomy (now reduced almost to the *prisca simplicitas* of the *apparatus minor*), that our anticipations, we must confess, are considerably damped; and, indeed, some of the instruments which we have seen appeared not altogether free from the risk of portions of them breaking off during the process of grind-

ing the stone, and thus remaining in the bladder. The success of the operation, besides, mainly depends on the extreme familiarity of the operator with his instruments; though much of this objection will be removed, no doubt, when the process is better understood. The manipulation is so different from that required in ordinary operations, that our most experienced surgeons will feel some awkwardness when they first attempt it; and we have heard that M. Dupuytren made trial of it in the Hotel Dieu without being successful. Any decided opinion, indeed, must be given cautiously: it bears upon it the fascinating stamp of novelty; it promises a great good, but it has yet to undergo the rigid test of time. Claims it unquestionably has, and strong ones too, upon our notice; and we are happy to find that it is being tried in our hospitals, where its merits will soon be put beyond dispute.

We have spoken of M. Civiale, throughout these remarks, as the true inventor of lithotritry: such is our persuasion. He was indisputably the first who made known to the public the possibility of performing such an operation; whether he was the first who *thought* of its feasibility we will not decide: but be it remembered that it was not until he had *published* his experiments, that other competitors for the honor of the invention made their appearance. We cannot stay to moralize on the fate of most originators of useful projects; but we suspect that M. Civiale must be content to await tranquilly, though confidently, a tardy decision upon his claims.

III.

ON CARBONATE OF AMMONIA.

By DANIEL B. SMITH.

THE volatility of this salt renders it extremely difficult to preserve uninjured in vessels that are occasionally opened to the air. When in its perfect state, it is composed of one atom or twenty-two parts of carbonic acid, and one atom or seventeen parts of ammonia. There is, besides this salt, another combination of carbonic acid and ammonia, containing two atoms of acid, or forty-four parts, and one atom, or seventeen parts of alkali. This salt, which is the bicarbonate, has no smell and less taste than the carbonate. It is formed when the latter salt is exposed in powder to the air. The carbonate of ammonia of commerce is now obtained, in great part, from the tarry liquid obtained in the distillation of coal gas. It is sublimed in moderately hard semi-transparent cakes, which are brittle and white. By exposure to the air, part of the alkali soon escapes; it loses its strong smell of ammonia, and is gradually converted into the inodorous bicarbonate. So rapid is the progress of this change, that it is seldom we meet with the article in our shops which is not more or less injured by it. The first sign of the loss of alkali, is the efflorescence on the surface, which gradually extends till the whole crystalline mass is altered. It is from this cause that we have so much difficulty in pleasing those who are particular about the quality of their "smelling salts."

A preparation, called "the Preston smelling salts," has within a few years been introduced

from England, and has deservedly been much sought after. The manufacturers have wisely put it up in very wide-mouthed bottles, which enable one to inhale a much larger quantity of ammonia at once, and thus increase the apparent strength of the salt. But it has other qualities to recommend it, than the manner in which it is put up for sale. It retains its color for a longer time and wastes more slowly than the common smelling salts.

It was generally believed, when the article was first brought here, that its superiority was owing to the sublimation being made at once into the bottle, so as to avoid any loss of ammonia by unnecessary exposure to the air. An examination, however, will satisfy any one that the salt is *crystallized*, and not sublimed. The superior compactness and hardness of a crystalline over a sublimed salt, are great advantages in so volatile a substance as the carbonate of ammonia; and to this, I have no doubt, the good qualities of the Preston salts are to be attributed.

The salt may be crystallized with great facility in the winter season. The plan which I have followed is to dissolve, in a pint of pure aqua ammoniac, a pound and a quarter of the crystalline carbonate of ammonia, with a gentle heat.

By exposing this to a freezing temperature, crystals of the carbonate of ammonia will be obtained, the size and hardness of which will depend on the length of time which they require to crystallize. I use the aqua ammoniac as a solvent to secure the formation of salt with the minimum of acid.

I recommend to those apothecaries

caries who wish to procure an excellent carbonate of ammonia, to adopt this process, which will furnish them with a salt in all

respects equal to the Preston smelling salts, at one-eighth of the price which the latter costs us.

BOSTON, TUESDAY, OCTOBER 20, 1829.

DELIRIUM TREMENS.—MEDICAL
JURISPRUDENCE.

DR. DRAKE, of the Western Journal, mentions a late trial before the Supreme Court of the State of Ohio, of an individual about fifty years of age, and the father of a large family, who, during an attack of delirium tremens, had murdered his own wife, by cutting through her neck with a narrow axe, which severed the spinal column and caused instant death.

"It appeared from the testimony," says Dr. D., "that for several years he had been subject to occasional fits of intoxication, which in the latter part of the time had been followed by *Mania a potu*, which generally lasted for several days, and went off spontaneously. In these paroxysms he had the physical and moral symptoms which usually characterize that malady. The former were, great tremors of the hands, a pale face, red eyes, and sometimes a copious perspiration, even when exposed half naked to a cold atmosphere. The moral phenomena were, disordered perceptions of sight and hearing, so that he often insisted that he saw himself surrounded by snakes and other reptiles, or by armed men who sought to kill him; or supposed he heard strange sounds of trumpets, or vocal music, or conversation of which he was the subject, and the object of which was mischief to himself. He was thus filled with apprehension for his safety, and sometimes ran about the village at night, as if attempting to escape from bad persons who were pursuing him. On a

certain night, he made so much clamor as to excite the idea of several men engaged in a riot. At another time, in his own house, he concealed himself between the feather and the straw bed, where he was almost suffocated. On another occasion, he was found, after dark, standing in the street without shoes or hat, and had described around him a circle in the dust, and declared that if any one entered it, that person would kill him. At other times he would peep from his window, and point his gun, as for defence, against imaginary persons, who were approaching to seize him. Again, he would fancy that two armies were engaged in battle, and that he must join one of them. In all his paroxysms he had so great a degree of watchfulness, as to sleep little or none for several nights in succession. But his prevailing maniacal conception was, that his wife was in a combination with three of his neighbors, one of whom was his son by a former wife, and that they had conspired against his life. Of these men, when they were not in his presence, he was afraid. In the paroxysms he was accustomed to charge his wife (unfoundedly in the opinion of witnesses) with a criminal intimacy with these persons. He even threatened to kill her if she did not desist, and had been heard to utter this threat when he was thought by one of the witnesses to be rational.

"On the Sunday before the murder he drank freely, and was intoxicated, in which condition, as usual, he was quiet, dull, and disposed to lie in bed. Monday, Tuesday and Wednesday presented nothing special. On Wednesday evening he

complained to a neighbor of feeling unwell, and asked his son's assistance in the performance of some necessary manual labor for his family. He seemed to the witness to be rational. During the night he slept none, and complained of cramp in his stomach. The next morning his family thought him crazy, but were not alarmed, as they were accustomed to such attacks. In the course of the day he took an axe on his shoulder, and walked rapidly to the house of a neighbor, whom he desired to go home with him, saying they wanted to kill him; and about the same time he told another of the supposed conspirators that he had overheard his wife and him, that morning, whispering about taking his (witness's) life.

"He spent the day at home, in the midst of his family, apparently in agitation and terror, but said he would not hurt any one, and did not wish to be hurt. In addition to the axe, which he placed under the bed, where it was often kept, he provided a scythe, which he brought into the house. He manifested jealousy of his wife, and told her to act better, for she had already caused the death of thirty thousand men. He fancied that the persons of whom he was jealous were in the loft manufacturing ropes to hang him, and going up, returned and said he had cut the ropes to pieces, and brought down the fragments with him, though he had nothing in his hands. In the course of the afternoon, he fastened both the doors of his house. At the usual time his wife went out to milk, and he barred the door after her. On her return he fastened it again. She was seated near the fire, and he was walking the room. At length he took the axe from under the bed, and suddenly gave the fatal blow, following it up with two others on the face. His oldest daughter caught the instrument, which he yielded up, and then seized the scythe, with which he attempted to strike her. She defended herself with a chair,

till the smaller children having opened the door, she made her escape. He took his youngest child in his arms, and sat down by the window. The child exclaimed, 'mamma bleeds!' which he said made him feel bad. When his neighbors arrived immediately afterwards, he gave himself up, acknowledged what he had done, said he knew he would be hung for it, but that he ought to have done it nine months sooner; and that if he had it to do again, he would strike two blows where he only struck one. Talked so rationally that many of the witnesses could not believe him deranged. Evincing no dread of punishment for his crime, but was still in great apprehension from the persons who, he had believed, intended to kill him. Was glad that he had defeated their calculations. On his way to the city to be committed to jail, talked rationally and composedly about his affairs, and on various subjects; but frequently asked the guard if they did not hear sweet sounds of different kinds, and on being answered in the negative, insisted that he could not be mistaken. After being committed he became regular, and expressed his regret at what he had done."

The defence set up was insanity. He was, however, found guilty of murder, and condemned accordingly. We shall not attempt to follow Dr. Drake in his excellent remarks on this case; but present to our readers such a view of the subject as has been suggested to us by the perusal of them, and by such other inquiries as we have been enabled to make.

The law which holds the madman exempt from the punishment of crimes committed under the influence of his derangement, is obviously founded in reason and humanity. This immunity, however, does not, according to the common law, extend

to the drunken man who commits a crime while under the excitement of liquor. There are several reasons for the severity of the law on this point, some of which respect the criminality of the evil doer, and others have a principal reference to the security of the public. We will endeavor to present these to our readers in a distinct form.

1. Drunkenness is itself a crime, and he who alleges it as an excuse, attempts to take advantage of his own wrong. "The law," says Blackstone, "will not suffer any man to privilege one crime by another." The language of Lord Coke on this point is still stronger. "The drunkard," says he, "is voluntarius dæmon, and whatever ill he doth, his drunkenness shall aggravate it. Nam omne crimen ebrietas et incendit et detegit."

2. The drunkard deprives himself of reason, knowing that when so deprived, he is liable to commit violence on the persons of others. The first crime, therefore, includes the consequences which result from it. Such is the language of the Roman law :—"Culpâ non carent, quod inebriari se passi sint." And again :—"Quid quod nec dolo careant,"—they cannot even be acquitted of evil intention,—"*si non simplicitate rebrii, id est tales, qui præter consuetudinem vino capti sunt, dum suas aut vini vires ignorabant, aut inviti compelluntur cum strenuis paria bibendo facere ; sed vel ebriosi, qui ignari non sunt quo ruere soleant vino victi, vel etiam insolentes, qui hanc ob causam largius bibunt, ut audentius in injuriam eant.*"—*Voet in Pandectas* XLVIII. 10. 1.

3. If the law were otherwise, drunkenness might be pretended, in order to commit crime with impunity, and a fraud of this nature could not, without great difficulty, be detected.

4. The same state might voluntarily be incurred, for the double purpose of exciting the courage to commit a crime, and of escaping its penalties ; and thus the hardened villain would be furnished with direct means to elude justice. Such is the character of the wretches described by the author above quoted ; "insolentes, qui hanc ob causam largius bibunt, ut audacius in injuriam eant."

Two general propositions, then, are involved in the law on this subject :—1. That in using liquor to excess, knowing its possible consequences, the drunkard makes himself answerable for these consequences. 2. That the public welfare requires that he should be held thus answerable. We have then to consider the correctness of these principles in themselves, and their application to the case of delirium tremens.

1. If it be true, then, that he who indulges in liquor makes himself responsible for all its effects, the maniac a potu can no more claim immunity, than he who acts under the immediate influence of intoxication. We cannot escape this conclusion by saying, that the delirium in question is a remote and distinct effect of the indulgence ; that it occurs as the sequel of long-continued and repeated excess ; or that it often, nay generally, happens in consequence of withdrawing the very stimulus to which the drunkard is accustomed. It is still among the effects of this vice ; an evil which subsists in virtue of

intemperance, and which would not subsist without it. If, then, in the phrenzy of his delirium, the unfortunate subject of it commits murder, this too was among those possible consequences of his original excess, for which he made himself responsible. But is it not obvious that this mode of reasoning proves too much? Suppose the drunkard to have passed through the successive paroxysms of ebriety, and even the short-lived mania of delirium tremens, without committing any serious act of violence on the persons of his fellow-men. A darker doom now awaits him. The repeated shocks which his reason has received have finally overpowered it. He becomes permanently insane, and while in this state, commits an outrage on the person, or takes the life, of some one unhappily exposed to his fury. Would it be said that the action was not excused by his insanity, because he brought that insanity on himself? Such an argument never could be listened to with patience, either within a court of justice or without it. By the late reports of madhouses in England, it will be seen, that a very considerable proportion of their inmates have become so from this indulgence. All these, then, are moral agents, and responsible for the crimes they perpetrate. Nor is this all. The victim of gaming, of debauchery, of unnatural crime, are equally in this sense the authors of their own misfortunes; and shall we add to this the imputation of guilt, when their phrenzy has inspired them to the commission of acts, in their nature violent and unlawful? We

freely confess that such a sentiment seems to us to violate the plainest dictates of humanity, and we are not aware that it is sanctioned by the laws of any civilized nation.

2. Are the considerations of expediency, on which the drunken man is made responsible, equally applicable to the subject of mania a potu? The reasons for the law, arising out of these considerations, are, as above mentioned, the ease with which drunkenness may be simulated, and the possibility of its being actually induced for the sake of committing crime. Neither of these reasons has any application to the case of delirium tremens. With regard to the first, we venture to assert, that there is no form of mania, the counterfeiting of which is attended with more serious difficulty than the one in question. It is a disease induced by peculiar causes, and accompanied and marked by appropriate symptoms, some of which it is utterly impossible to simulate. It is a disease which comes on slowly, with gradually increasing violence, until it arrives at its acme, which often does not happen for many days. The task of one who should attempt to counterfeit its gradual progress and its eventual paroxysm, is beyond almost any effort of deception which the mind can conceive. To suppose, then, that it would be feigned by one intending to commit an outrage, as the most convenient means of doing so with impunity, is utterly extravagant. As respects the second reason, we hold it still less applicable to the case under consideration. This state could not be induced at

the will of the intentional criminal ; nor if it could, and the zeal of the individual was sufficient to induce him to hazard his life in such a project, could it be subjected to his control, and made subservient to his views. The notion of *design*, therefore, in its production, is entirely too absurd for serious refutation.

But if it is said we must *prove* the maniac a potu to have been actually insane, in order to entitle him to the consideration claimed, the demand is unquestionably reasonable and just. Whether the prisoner was or was not so, in any particular case, is matter of evidence, and must be decided by proper testimony. In regard to this point, there is an important distinction, which has been often made, and which is laid down with sufficient precision by Dr. Drake. Unless it appear in evidence by the actions of the prisoner, that in regard to a particular subject or train of ideas, his reason was actually perverted, and farther, that the murder, or other outrage, was the consequence of this particular perversion,—was committed in accordance with the false premises and erroneous notions thus adopted,—unless both these points were clearly made out, he should be held guilty. On all but the particular subjects of his phrenzy, the maniac is a moral agent, and responsible to the laws ; and if he perpetrates a criminal action, aware of its nature, and conscious of the outrage he commits, he makes himself a subject for the penalty of these laws.

We would add one remark, which, though not essential to the argument,

will tend to illustrate still more strongly the distinction between delirium tremens, and the paroxysm of intoxication. It has been said that drunkenness does not impair the judgment, except as it inflames the passions, and exhibits them in a true though stronger light. As, then, violent passion from moral causes furnishes no excuse for the actions committed under its influence, similar excitement from a physical cause ought to be viewed in the same light. “*Ebrietas omne crimen incendit et detegit*,” and if the drunkard is only exhibiting his true character, stripped of the disguise which in his sober intervals he is able to throw over it, he is not the less a moral agent, and answerable for his conduct. Something like this is a strain of argument, adduced seriously, *we presume*, by the learned commentator on the Pandects before quoted. “*Etsi vero tale propositum talisque machinatio præmeditata non est in illis, qui impetu peccant, non tamen dolus in universum deest ; nam et homicida impetu peccat, non modo cum justis sed et cum injustis doloris impetu, et sub iræ motu ad cædem procedit.*”—*Voet XLVIII. 10. 1.*

Whatever may be thought of the soundness of this philosophy in view of the ebrious paroxysm, it is evident that it does not at all apply to the subject of delirium tremens. *He* exhibits nothing of that exaggerated state of the passions, of that boisterous violence which marks the drunken man ; he is timid, watchful and jealous ; and much more disposed to apprehend injury from others, than wantonly to inflict it on them. Such

was the state of the individual in the case alluded to, and surely there is none which renders a man more truly and deservedly an object of compassion.

Judging of the case, then, on these principles, we have no hesitation in saying, that the act of the prisoner was the act of a madman. The idea which constantly presented itself to his mind, was that of a plot formed against his life, which placed him in continual and imminent danger. Under this delusion, he threatened his wife with speedy punishment, if she did not desist from her purpose. From these premisses he drew the conclusion, that the destruction of his supposed enemies was an act of self-defence, and on this conclusion he acted. No case of mania could be more perfect in all its parts, or present a stronger claim to forbearance and mercy.

We conclude, then, that the law which makes the drunken man responsible for his actions is, both in its principle and its policy, wholly inapplicable to the case of the maniac a potu; and that the latter is entitled to all the privileges which madness, under any circumstances, can confer on its unhappy subject. We would add what we consider an equally important inference, that the treatment of this form of mania ought to be regulated on the same principles as that of any other. The case above cited is a melancholy proof that maniacs of this description require the constant vigilance of friends, to prevent them from doing mischief to themselves or those near them. We are satisfied that the amount of care

bestowed is in many instances wholly insufficient, and that great hazards are frequently incurred from indulging the notion that the subjects of this delirium are altogether harmless. There are two rules in regard to persons in this situation, which ought to be rigidly adhered to; one, that they be never suffered to go abroad alone—and secondly, that they should never be left in the care of female relatives. That both these precautions are often neglected with impunity, we are well aware; but this by no means disproves the existence of the danger; and the occurrence, in a single instance, of the horrible consequences above related, affords a warning which we hope will not be disregarded.

SILLIMAN'S JOURNAL.

WE acknowledge the receipt of the last No. of this important and useful work. It is truly a most splendid production. We are not in the habit of using superlatives, but without them we can give no opinion of the work before us. We rejoice to learn that the late appeal of the Editor to the public, has been the means of adding 250 names to his subscription list; and that the Journal will now be continued. A periodical which does so much honor to the country, ought not, however, to be barely supported. Two hundred subscribers more would complete the number of 1000, with which the work might go on without embarrassment, and a liberal compensation allowed for the able productions it sends forth into the world of science.

SMELLING BOTTLES.

THERE are few persons who have not noticed that within a few months smelling bottles of a new form, and containing salts of a fine flavor, have been found in the shops of our apothecaries. An account of these salts is given on our 566th page, in an article extracted from the Journal of the Philadelphia College of Pharmacy.

This new periodical appears to be conducted with great ability by Dr. Benjamin Ellis, of Philadelphia, assisted by other professional gentlemen. It contains a deal of pharmaceutical intelligence, of great value to Physicians as well as Apothecaries ;—but of the latter, there ought not, we hope there will not be one in the country who does not avail himself of the information contained in this work.

ANATOMICAL DISSECTION.

THE following remarks appeared in a late No. of the BOSTON TRAVELLER. They evince a degree of light in the mind of the Editor,—like evidences of which we would gladly see in the conductors of all our newspapers. The sentiment has been often expressed in this Journal, that a better policy in the laws respecting dissection must begin with the people ; and when we see Editors of newspapers and other popular publications, coming forward with wise and enlightened views on this subject, we cannot but believe that the people generally will soon be better informed, and think and feel and act as becomes those who, as *individuals*, are deeply and *personally* interested in the cul-

tivation of a correct knowledge of human anatomy ;—a knowledge, without which there can be no such thing as medical or surgical skill,—without which disease must get the better of our remedies, and the lives of our patients must be sacrificed to common accidents, and comparatively trivial disorders.

“ So much excitement and strong prejudice has been created in various places by the disinterment of bodies recently deceased for anatomical purposes, that all friends of good order and reasonable law will willingly aid in preventing among us the growth of a body of individuals, whose chief business shall be to violate the sepulchres of the dead. In Europe, as recent shocking narratives have proved, owing to a want of some legal mode of providing sufficient supplies, or to some other cause, a band of resurrectionists has grown up, composed of the most reckless and hardened wretches, who have not hesitated to commit murder to prosecute their unhallowed purpose.

“ That the slightest encouragement may not be extended to body stealers,—that the sepulchres of the dead may be preserved inviolate, and the feelings of the living be spared a pang, the State Medical Society have earnestly applied themselves “ to consider if any change can be effected in the laws of the Commonwealth, in relation to human dissection.” A vigilant committee has been appointed, and a circular on the subject has been printed and sent to physicians generally, throughout the State. It is expected the subject will in some way come before the legislature, at its next session, and a petition be presented for a change of its existing statutes.

“ Some of the representatives have imbibed the popular prejudice, and would view with something like horror any legal provision for favoring

the dissections of the schools. But we are convinced there is no alternative, in order to obviate the difficulties and dangers which now oppose the practical study of Anatomy, and to preserve the peace of individuals and of society; and therefore hope the gentlemen of the Legislature, before their next session, will give the subject due attention, and if possible divest themselves of that feeling which has blinded the community to the importance of the desired knowledge, and retarded the progress of medical science in this country."

Phlegmasia Dolens.—Dr. Lee, of Argyll Street, a sound and experienced pathologist, and one of the most rising accoucheurs in the metropolis, has published a paper in the last volume of the Medico-chirurgical Transactions, which at length completely proves this formidable disease to depend on an inflammation in the large veins of the groin. But we understand that this excellent physician has gone considerably further, and that he is in possession of the history of a fatal case, with the preparation, which demonstrates beyond doubt that the inflammation originates in the veins of the uterus, and from them spreads to those of the groin.

This important discovery very satisfactorily accounts for the violent fever and other symptoms which attend the disease.—*Gaz. of Health.*

Partial Palsy cured by Strychnia locally applied.—The subject of this case was an habitual drunkard, aged 36 years. He had lost the power of the left forearm and hand ten days previously. The sensation of the parts was perfect, but the mobility much impaired. There was no headach. Over a vesicated surface on the back of the forearm, one-eighth of a grain of strychnia was sprinkled. The dose of the medicine was increased by doubling the

quantity every day, until it amounted to one grain, after which a fourth of a grain was to be added. The improvement was manifest from the second week, and the patient, without having experienced any uneasy symptom, was dismissed cured at the end of five weeks from the commencement of the treatment.

In another patient, affected with paralysis of the flexor muscles, and diminished sensation of the right leg, a cure was effected in the course of six weeks.—*N. A. Med. & Surg. J.*

Pregnancy after Amputation of the Cervix Uteri.—M. Lisfranc announced to the Academy of Medicine that two other females (Vide *N. A. Med. and Surg. Journal*, Vol. II. p. 14 and 420) who were pregnant after amputation of the neck of the uterus, have been happily delivered at the full period of uterogestation. One who, anteriorly to the operation, had very rapid labors, was in labor forty-eight hours: in the other, who was in labor for the first time, two hours of pain were sufficient for the expulsion of the fœtus. No bad consequences resulted, and the health of each female was excellent.—*Journ. Generale.*

Adhesion of the Placenta to the Head of the Fœtus.—From the *Nouv. Bibliotheq.* for May, we learn that M. Lauray has transmitted to the Royal Academy of Medicine the details of the following case:—A labor being fortunately terminated by turning the fœtus, which had presented an arm, the placenta was found adherent to the hairy scalp of the child. The head was flattened at its anterior and superior part, where the os frontis was wanting. A projection of the brain, covered by the integuments, was noticed in the situation of the right eye, which last was wanting. There was a hare lip, &c. &c. The infant lived thirty-two hours. No attempt was made to separate the placenta from the head, to

which it adhered to some extent, to the fore part, to the left and to the centre (top) of the hairy scalp. No explanation was offered either as to the cause or manner of the adhesion. The liquor amnii had flowed in abundance a short time before the accouchement, and gestation was not attended by any remarkable circumstance.—*N. A. Med. & Surg. Jour.*

Punctured Wounds.—Dr. James Fountain, of Westchester, New York, believing that a state of irritation always precedes the state of inflammation in punctured wounds, maintains that the treatment, immediately after the accident, should be predicated on this principle, which he says experience confirms. Hence he advises local and general stimuli: of the former, he prefers heat with moisture. A tobacco poultice is particularly recommended.—*N. Y. Med. and Phys. Journal.*

Wound of the Brachial Artery.—Mr. Smith, Surgeon to the Bristol Hospital, details two cases, and alludes to two others, in which, under well regulated pressure, a wound, by a lancet, of the brachial artery healed, no aneurism being formed. In these cases the vein was not punctured.—*Medico-Chirur. Rev.*

Mortality among Leeches during Storms.—That atmospheric changes have a remarkable influence on

leeches, is a well established fact. In 1825, M. Derheims, of St. Omer, ascribes the almost sudden death of them, at the approach of or during storms, to the coagulation of the blood of these creatures, caused by the impression of the atmospheric elasticity. This opinion, which at that time was the result of theory, he confirmed in the month of March last, by direct experiment.—*Ann. des Sciences d'Observation.*

Crystallization of Iodine.—During the course of his researches on the combinations of Iodine and Arsenic, M. A. Plisson has ascertained that Iodine crystallizes in acute octahedrons and in rhomboids, and that it may be obtained under those two forms, by exposing ioduretted hydriodic acid. He also remarked that iodine assumes rhomboidal forms in the upper part of a flask, in which ioduret of arsenic has been kept.—*Ann. de Chim.*

The Color of the Sea—is ascribed by Sir Humphry Davy, in part at least, to the presence of iodine and bromine, which its waters certainly contain, and which result perhaps from the decomposition of marine vegetables. These two substances, dissolved in a small quantity of water, give a yellow tint, and this tint, mingled with the blue tint of pure water, may produce the sea green.—*Salmonia.*

WEEKLY REPORT OF DEATHS IN BOSTON, ENDING OCTOBER 9.

Date.	Sex	Age.	Disease.	Date.	Sex	Age.	Disease.
Oct. 1.	M.	18 mo	measles		F.	12 mo	measles
	M.	14	lung fever		M.	5 yrs	do.
2.	F.	24 d	infantile	6.	F.	58	consumption
	F.	8 mo	dropsey in the head		F.	3	measles
3.	F.	2 yrs	convulsions		F.	5 mo	convulsions
4.	M.	65	dropsey		F.	7	lung fever
	M.	2 1-2	unknown	7.	M.	5 yrs	measles
	M.	45	do.		F.	12 mo	do.
	F.	96	old age		M.	19	do.
	M.	15 mo	infantile		F.	62 yrs	unknown
	F.	40 yrs	consumption		M.	32	scarlet fever
	M.	2 d	unknown	8.	M.	24	unknown
	M.	26 yrs	typhous fever		F.		consumption
5.	F.	2 1-4	complaint in the throat	9.	F.	22 mo	inflammation in the bowels
	F.	77	old age				
	M.	6 w	unknown				

Males, 14—Females, 16. Total, 30.

ADVERTISEMENTS.

CONSOLIDATED COPAIVA.

"COPAIVA may be given in this form without the least inconvenience. Neither communicating taste, nor imparting odor to the breath, it is also retained without the least disquietude or uneasiness to the stomach; and I am informed by Dr. Rousseau, that in large doses it does not purge."—*Phil. Journal of Med. Sciences.*

See an article in this Journal, Aug. 18th.

OIL OF BLACK PEPPER.

This is a much more active preparation of Piperine. One drop is fully equal to six grains of the latter. It is a valuable adjunct to Quinine. One or two drops, added to six grains, will greatly increase the efficacy of that medicine.

For sale by NATHAN JARVIS, 188 Washington Street, where Physicians will find medicines at as reasonable terms as at any place in Boston.

Aug. 25.

eopty.

LEECHES, CHIRAYITA HERB, &c.

E BENEZER WIGHT, 46 Milk Street, has made such arrangements as will enable him to be constantly supplied with the genuine *Medicinal Leech*. He has now on hand some of very large size, and in prime order.

Just received, by late arrivals, a few pounds of *Chirayita Herb*,—Concentrated Compound *Decoction of Sarsaparilla*,—Laurel Water,—Silver Wire Tooth Brushes, from the manufactory of James Prout, of London.

Also, from the manufactory of Shepherd, of London, the following variety of *Medicated Lozenges*, viz.:—Coltsfoot—Rhubarb—Soda—Tolu—Heartburn—Paregoric—Magnesia—Steel—Camomile—Nitro—Cayenne—Opium—Fruit—Ginger—Anniæed—Ipecacuanha—Lemon—Rose—Peppermint and Sulphur.

* * Strict personal attention paid to Physicians' prescriptions, and family medicines.

Oct. 6.

eopty.

MORBID ANATOMY.

CARTER & HENDEE have just received,—The Morbid Anatomy of the Stomach, Bowels and Liver; illustrated by a Series of Plates from Drawings

after Nature, with explanatory letter press, and a Summary of the Symptoms of the Acute and Chronic Affections of the above-named Organs. By JOHN ARMSTRONG, M.D.

The above work will be completed in six numbers, at \$6.00 each. Three numbers are already published. Subscriptions received by C. & H.

Oct. 6.

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A TREATISE on the Scrofulous Disease, by C.G. HUFELAND, Physician to the King of Prussia, &c., translated from the French of M. Bousquet, by Charles D. Meigs, M.D., is just received and for sale by CARTER & HENDEE.

Sept. 8.

CARTER & HENDEE have just published,—The Constitution of Man, considered in Relation to External Objects. By GEORGE COMBE.

From the Preface to the American edition.

"Mr. Combe's work should be placed with those, of which so many within a few years have appeared, which are devoted to the all-absorbing topic of Education. It treats of moral, intellectual, and physical education. This is not formally done under so many distinct heads. But the whole course of reasoning of the author, and the whole array of all his illustrations, have it always obviously in view to show how the highest cultivation of each of these may be most surely brought about.

"The publishers have printed this edition from a belief that there is much in the work to interest the community.

"It has a novelty to reward the general inquirer, and it presents the well known under novel aspects. There is one class amongst us who may study it with much advantage. Scholars are referred to, a class here too small to form a distinct order with habits of their own, and who insensibly fall into those which, although not mischievous, to the multitude on the score of health, too often make ill health the portion of the sedentary student, and bring upon him premature decay.—To all classes it is recommended, and the various learning and acuteness of the author well fit him to write a book which addresses its instructions to the whole community."

Sept. 8.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

THE BOSTON
MEDICAL AND SURGICAL JOURNAL.

VOL. II.]

TUESDAY, OCTOBER 27, 1829.

[No. 37.]

I.

HISTORY OF PANACEAS AND NOSTRUMS.

A NOSTRUM is commonly a specific for one disease or a panacea for all, and its virtues are always attested by the most solemn facts. It promises to preserve health without breach, or to extend life without limit. The chief exception to these merits is, that disease and death are still brought into the world, and that nostrum-takers have hitherto forborne to attain to the longevity of Methusalem. These magnificent pretensions have been assigned to agents of every quality in nature, from the insipidity of cold water to the hot pungent intensity of mustard seed.

In the reign of Charles the First, the *universal* virtues of the *magnetical caps* were set forth in a "Compendious Declaration," by John Evans, Rector of Lyttleton-upon-Severn, who made them himself of antimony, and sold them in Martin's-lane. Like the Rev. Caleb Carrington, present vicar of Berkeley, and inventor of the "Life Pills," he combined the vender of a nostrum for the preservation of the body, with the holy offices of the priest for the salvation of the soul. The preamble to a quack advertisement, of the same century, prefers this curious compliment to the English:—"Whereas the people of England, through the

moistness and mutability of their air, *foulness of diet, and disposition to excessive drinking*, are subject to rheumatisms, &c." Guester's "Practical Piety" might have been expected in an age when Praise God Barebones and the saints of 1641,—like the spiritual Quixote of the Select Cushion, and the Evangelicals of our own times,—deafened the air with clamors for Hudibrastic devotion.

The *warming stones* of the same epoch, more modest in their pretensions, claimed the curing of all agues, colds, deafness and tooth-ach.

The reign of Charles the Second abounded with quackery. The witty libertine, Rochester, who had studied physic in his youth, spoke a very humorous address to the mob in the character of a stage quack, which is still preserved in his works.—In 1734, *Ward's pills* acquired great repute. The able exposures of Dr. Turner exhibited, by facts and reasonings, "the murderous effects of violent vomiting and purging, in all cases and constitutions," of which they were productive. The basis was tartar emetic; a remedy of the highest value when given with discrimination. This nostrum was a revival of the pills of a Dr. Russell, of Holborn, who first sold them at one shilling a piece, a much greater price than is given now for any patent medicine, when

the value of money is less. Ward maintained the reputation of his nostrums by the common practice of all curemongers and quacks,—puffing the one case in which they *had done good*, out of the ten in which they had caused *the most serious mischief*. His brother first tried them on dogs in the Fleet, and of several dog-patients, one only recovered. Ward contended for the undeniable proof of twelve years success with them, *professed experience being always the pretext with this class of persons*, and ascribed the decrease in the bills of mortality to the amount of 3171 persons, after the great mortality of 1734, to his pills and drops. But the Grub-street Journal, a weekly paper, habituated to the exposure of the quackery, promulgated his failures, and declared that Ward's "sugar plums" had "worked so furiously," that they had "destroyed many infant children,"—a common effect of emetic tartar on infant constitutions,—and done execution in every part of the great city of London, and made great havoc among adults, *until they were analysed*.

The efficacy of nostrums generally ceases with the exposure of their composition. The country is much indebted to PARIS, for having, in his Pharmacologia, published analyses of the nostrums of the present day.—A young woman, who had taken Ward's pills for three days, "fell to screaming, and crying out of intolerable pain in her stomach and intestines, declaring the pills had killed her, and died the day following." Swift, then in the vale of years, but in full repute, as "the wittiest man in Europe," threw his triumphant ridicule into the contest, in a parody of Ward's advertisement of his

worm paste, in which, of course, Ward had endeavored to prove worms to be an universal disease. But another maintained that "the abilities of the great quack were too well known to be blasted by a slanderous pen; that his killing with one drop proved him to be a greater artist; and that quacks, in populous states, if *great ones*, should always be chartered." Ward excited, indeed, much humor and squibbling, often of a political mixture, masked under his name, and Pope did not disdain to exert his powers against this popular fraud and imposture.

The Abbé Bayeux, about 1730, gave celebrity to *hot water* in all diseases, and cured "dropsies, asthmas, colics, and other bad complaints," after "all the physicians had condemned them," according to the report of an *Englishman*, who, after "spending an income upon bark and advice, recovered after going to France to have his throat tickled with a feather, and drink hot water." Of course, he imputed nothing to travel, change of air and scene, and the encouragement of hope, which dispose the constitution to recovery; and, in fact, constitute almost the sole efficacy of watering places.

Previously, in 1723, John Smith, C. M., and Ralph Thoresby, F.R.S., and John Hancock, Rector of St. Margaret's Lothbury, London, Prebendary of Canterbury, and Chaplain to his Grace the Duke of Bedford, had published two essays on "The Curiosities of Common-water," and "Common-water the best Cure for Fevers." These tracts, and several others on the subject, ran through four and even six editions. Smith declared that "forty-four years' experience,"—for *facts and experience* are never

wanting in these concerns,—“had confirmed the *stupendous* effects thereof;” and that it might truly be styled “an *universal* remedy, since the diseases it either prevents or cures may have this remedy applied to all persons, and in all places where men do inhabit.” But Hancock, the other doctor divine, candidly confessed “that it was a little out of his way to write on physic, but that he was not the first man who had writ a book of a subject he knew little of (p. 100).” In consequence of these clerical essays on physic, “the whole nation run a madding after cold water in every temper,” till at last, up starts a merry fellow, by the name of Gabriel John, who exposed the water-doctors in such a ludicrous but witty manner, that from that time the custom dwindled and grew out of use.

Quicksilver, which had been prescribed by Sir John Nicholas Butler, a very eminent physician in James the Second’s reign, and had cured “a lunatic and a swallower of worsted and other trash,” next came into general favor about 1730: but the history of this quackery must be reserved for another number.

II.

PHENOMENA CONNECTED WITH RESPIRATION.

THE force of a healthy chest’s action in blowing is equal to about *one pound* on the inch of its surface; that is to say, the chest can condense its contained air with that force, and can therefore blow through a tube the mouth of which is two feet under the surface of the water. In sucking or drawing in air, the power is nearly the

same.—In both these actions, it is possible to use the cavity of the mouth separately from that of the chest; and the mouth being smaller, with stronger muscles about it in proportion to its size, it can act more strongly. Some men can suck with the mouth so as to make nearly a perfect vacuum, or to lift water nearly thirty feet. In using the blow-pipe, an expert operator can keep up an uninterrupted blast by shutting the mouth behind while he inhales, and replenishing it as is required in the intervals.

In *coughing*, the *glottis*, or top of the windpipe, by a curious sympathy of parts, is first closed for an instant, during which the chest is compressing and condensing its contained air, and on being then opened, a slight explosion, as it were, of the compressed air takes place, and blows out any irritating matter that may be in the air-passages; just as the burst from the chamber of an air-gun discharges its bullet.—This shutting of the glottis to allow the compression of the air, and its subsequent opening to allow the discharge, may occur at very minute intervals, and many times for one fill of the chest, as is instanced in *hooping cough*.—The action of cough is often produced by irritation from a cause which cannot be removed by cough, as inflammation of the chest or tubercles; or even by irritation in a distant part, as when children are teething, or when the stomach is overloaded.

Sneezing is a phenomenon resembling cough, only the chest empties itself with great violence at one throe, and chiefly through the nose, instead of through the mouth, as in coughing. The irri-

tation that produces sneezing is generally in the nose ; but as in the case of cough, sneezing may occur from distant sympathies ;—witness that from worms in the bowels.

Laughing consists of quickly repeated expulsions of air from the chest, the voice being heard with them ; but there is never complete closure of the entrance to the windpipe, as in coughing.

Crying differs from laughing almost only in the circumstance of the intervals between the gusts of air being longer. Children laugh and cry in the same breath, and it is often difficult to mark the moment of change.

Hiccough is the sudden stopping of a strong inspiration at its commencement.

In *straining* to lift weights, or to make any powerful effort, the air is shut up in the lungs, that there may be steadiness and firmness of the person. At such a time, by the compression and condensation of air around the heart and large bloodvessels, the blood is determined violently outwards from the chest, and often rises to the head, with force that produces giddiness, or even apoplexy ;—the eye will become suddenly bloodshot, from a small vessel giving way during straining ; and leech-bites will break out afresh.—The force of this pressure outwards is measured, as already stated, by a column of about two feet of blood ; and this is therefore the measure of the additional arterial and venous tension in the body generally.

Suffocation is the name given to what happens when the supply of air to the lungs is in any way prevented. The blood, not then refreshed by the approach of the

air, rises to the brain unfit for its purpose, and confusion of thought is immediately produced, soon followed by convulsion and death.

When that happens from mechanical obstruction at the narrow entrance of the windpipe, as in croup, by the tenacious films thrown off from the inflamed lining of the air-passages, life may be saved by making a new entrance for air through the windpipe lower down in the neck, and keeping it free by a little tube inserted, until the obstruction above be removed.—Where children die with croup, it is frequently not from the violence of the constitutional disease, but from detached films thus accidentally sticking in the narrow entrance of the air-passage.

In the cases of strangling and hanging, the tight binding of the rope or ligature crushes inwards the cartilaginous rings of the windpipe, and shuts the air-passage. It may also cause apoplexy, by arresting the passage of blood to and from the head ; and there may be dislocation of the cervical vertebræ of the spine.

In *drowning*, communication with the atmosphere is cut off altogether by the supernatant water, and if the chest then expands, it can receive water only, instead of air. The nerves and muscles, however, at the entrance of the windpipe, being exceedingly irritable, are excited by the contact of any unusual matter, and for a considerable time shut the passage against the intruding liquid. It is partly on this account that, after immersion in water and apparent death, when the body is recovered within a moderate time, the life is often preserved.

III.

HISTORY OF A CASE OF VERMINOUS DISEASE.

By BENJAMIN S. BROWN, M.D., of Logan County, Ohio.

ON Sunday evening, the 29th of March, 1829, I was called to see the infant son of Mr. I. C., aged about four years. I was informed by the parents, that it had been suddenly attacked, a day or two previous, with severe griping pains of the bowels, resembling spasmodic colic; that its agony was very soon so great, that they apprehended it would go into fits; that they gave it a teaspoonful of spirit of turpentine, which afforded almost instantaneous relief; that after a short time they administered a dose of castor oil, which produced a few motions from its bowels, and brought away a few worms (*lumbricoides*.) On examination, I found the abdomen much tumefied and very tender on pressure: several hard lumps or knots could be distinctly felt in many parts, particularly along the course of the arch of the colon, and near the umbilicus; which regions especially were sore and painful on pressure. The pulse was about 60 in a minute, quick, somewhat depressed, but regular. The tongue had rather a white, smooth, slimy appearance; breath of a peculiar, disagreeable odor; the breathing was nearly natural; had no appetite since taking the oil, though I was told it had been very voracious for some months before, causing it to eat as much as was usual for two or three children of its age. The complexion was pale and sallow, with an anxious unmeaning expression of countenance: the lips appear-

ed to be swelled, particularly the upper one.

It being late in the evening, I gave a portion of calomel, about eight grains, combined with a carminative. On the morning of the 30th, no operation of the calomel having taken place, I made a decoction of spigelia and senna, and directed them to give it at short intervals, so that he should take it all by the middle of the day, at which time, if it should not have operated *freely*, to give another portion of calomel, combined with jalap, and afterwards to give a small dose of castor oil, every two hours, till it *did operate*.

On Tuesday, 31st, again visited my patient. Had taken all the medicine, without its producing any operation. Found him very restless and uneasy: the tumefaction of the abdomen was greater than before; complained of much griping pain; started and moaned in his sleep; in short, all the symptoms were rather aggravated. I made use of a strong solution of sulphate of soda, in a decoction of senna, as an enema, throwing up between half a pint and a pint at a time; this was discharged in about half an hour after each administration, without producing any other evacuation than a few worms, with what was thrown up. I directed a small portion of calomel, scammony and jalap to be given three or four times in the day, combined with a carminative, to prevent the griping, as well as its rejection by vomiting: the enemata were to be continued at intervals of three or four hours, and warm emollient fomentations applied to the abdomen.

Wednesday, April 1st.—No evacuation, and what was thrown

in by injection remained much longer than heretofore. The patient was evidently worse; was much debilitated, with great anxiety of countenance. The breathing was hurried and laborious; pulse frequent, small and feeble; tongue white, dry and sticky; breath extremely foetid; and the tumefaction and soreness of the abdomen much increased. I directed the enemata to be continued, with an addition of ten or twelve grains of tartarized antimony, to each portion thrown up; a powder composed of four grains of calomel, four of scammony, and five of jalap, to be given every two hours until eight were taken; then to give a small portion of castor oil at the same intervals, and, besides, to drink of a decoction of spigelia and senna, through the day. A large blister was laid over the front part of the abdomen, in order to allay, as much as possible, the irritation within, and to prevent the inflammation which, from the extreme soreness, I feared might take place.

Thursday, April 2d.—Not much alteration since yesterday. The blister had drawn well, and he had been more composed, had slept quietly for several hours, as soon as the blister had drawn. The enemata had no better effect than before. I directed the same course to be continued, the same number of the cathartic powders to be given, as yesterday, and the castor oil afterwards. Increased the quantity of tartarized antimony in each injection to fifteen or eighteen grains, and the patient to be put in the warm bath two or three times in the course of the day.

Friday, 3d.—No alteration ex-

cept for the worse. The injections, notwithstanding the increased quantity of tartarized antimony, had remained much longer than heretofore; they would occasionally bring away a worm or two, without producing any other cathartic effect. The little patient appeared to be fast sinking into the arms of death: a very feeble and frequent pulse; listlessness and insensibility; great debility; tongue moist, white and slimy; considerably comatose; distension of the abdomen about the same, but the soreness was less than before the blister was applied. I directed a pretty free use of brandy or wine, mixed with water. Made a trial of the tobacco injection; it was discharged immediately, without bringing away anything more than was thrown up. I began to despair of effecting anything by the use of injections, or indeed of strong cathartic medicines, as there had already been so much taken without producing any evacuation. I however directed the warm bath, and in consequence of his debility, I had it applied by means of a blanket wrung out of hot water; the patient being stripped and wrapped in it, as warm as he could conveniently bear it. I also advised a pretty free use of wine and water, and a small dose of castor oil, to be taken every two, three or four hours.

Saturday, 4th.—I was much gratified, on visiting my patient, to find that the medicine had begun to operate. The first motion from its bowels brought away a convoluted knot or roll of worms, which consisted of seventy in number, mixed with a large quantity of dark-colored, slimy, feculent matter, of a very disagreeable,

foetid odor. The medicine continued to operate throughout the day, and indeed for several days. The stools were pretty much of the same nature, and mixed with the same kind of worms, viz., *lumbricoides*, from four to eight or nine inches in length. They were nearly or quite all dead, and many of them pretty far advanced towards a state of putrefaction, indicating that they had been dead for several days. The number discharged was so great, as to induce the parents to count them. In the three first days, the number discharged was about four hundred, and during the week, five hundred and fifty-two, all of the above size.

Almost as soon as the medicine operated, the child had a good appetite, which it was found necessary rather to restrain than encourage. It advanced rapidly in strength, and was in a short time restored to its former health and spirits.

On reflection upon the case, I am led to the conclusion, that a principal reason of the obstinate constipation, was merely a mechanical obstruction of the intestines by the knots or rolls of worms which they contained; for as soon as the first large roll was discharged (which was of itself quite sufficient completely to obstruct any part of the alimentary canal), the cathartic effect of the medicine appeared to go on very naturally. The indurations, which could be felt in the abdomen along the course of the colon, I have no doubt were of this nature, from the circumstance of their frequently changing their positions, and entirely disappearing immediately on the operation of the cathartic medicine.

The whole amount of medicine which the patient took during the week, before it operated, was about 100 grains of calomel, 75 of scammony, 75 of jalap, and 2 pints of decoction of spigelia and senna, besides a large quantity of oil and epsom salts, given by the mouth, and an incredible quantity of senna, salts, and tartarized antimony.—*Western Journal*.

IV.

HEMIPLEGIA.

Employment of Strychnia.

JAMES JEVONS, æt. 10, came into the Worcester Infirmary May 30th. Has partial paralysis of the right side; occasional headache; the pupil of the left eye contracts very irregularly; pain and tenderness in the hypogastrium; intellect much impaired; memory very bad; looks idiotic; tongue, when projected from the mouth, is directed towards the paralytic side; bowels costive; tongue clean; pulse 84, weak. About Christmas last had a fall from a cart, and received a severe wound over the left orbit, from which time he has complained of occasional headache. Has had symptoms of hemiplegia for five weeks: has been under surgical care, but obtained only temporary relief.

Applic. hirud. xii. lateri capitis sinist.
Sumt. Haust. Cathart. ʒi. statim.
et repet. post horas tres, si opus fuerit.

June 2d.—Is much relieved by the application of the leeches. Head more free from pain; can raise his arm with more ease; walks better; pupil of the left eye contracts more regularly;

tongue projected from the mouth in a straighter line ; can move it to the left side with ease, which he could not do before ; answers questions more regularly.

3d.—Rept. Hirud. Cras ; persist in usu haustus cath. omni mane.

5th.—Is much better since the application of the leeches.

7th.—Applic. Emp. Lyttæ lateri capitis sinist. postea. Ung. Antim. Tart. ibidem.

9th.—Can use his extremities with much more facility ; pupil of the left eye contracts more naturally.

14th.—Sumt. Mistur. Cathart. p. r. n.

16th.—Opens the hand much easier ; the extremities much less paralytic.

19th.—Sumt. Strychniæ, gr. 1-6 ter in dies.

24th.—Continues to improve.

Rept. Emp. Lyttæ Capiti.

July 7th.—Has continued to improve under the use of the strychnine.

Augeatur Dosis Strychniæ ad gr. 1-3 ter die.—*Midland Reporter*.

SKETCHES OF PERIODICAL LITERATURE.

EPIDEMIC IN OHIO.

IN the July No. of the Western Journal is contained an account of a bilious remittent fever, which prevailed in and near Circleville, Ohio, from the middle of August, 1828, to the middle of October. The principal remote cause appeared to be the excavations made for the Ohio and Erie canal, near that town ; and the laborers engaged on that work were the principal sufferers. The disease was not inclined to assume the intermittent type ; the remissions themselves were mostly of short duration. The treatment appears to have been sufficiently active. The patient, if seen within the first few days, was bled from one to three pints. After this the use of calomel was commenced, in doses of forty grains every eight hours, and continued two or three days, until the bowels were freely evacuated. Two grain doses were then given every two hours, until salivation took place.

This mode of treatment is described as uniformly successful. Death never occurred after ptyalism was established. When this effect had resulted from the use of the calomel, epispastics were applied to the forehead and extremities. If applied earlier, they retarded or prevented the ptyalism ; but employed after the latter was established, they were found very useful in moderating its violence. The latter observation is confirmed in a note by the editor of the Journal. Blisters applied to the nape of the neck, were found by him very efficacious in arresting the inflammation of the mouth and throat, caused by the use of calomel. This would seem to be a fact of considerable interest.

MESMERISM.

SOME new cases of the employment of this agent are related by Mr. Chevenix, in the August No. of the Med. and Phys. Journal. The per-

sons subjected to its influence were seven in number, all patients in a hospital. On the first, no visible effect was produced. The second, after being *mesmerized* a few minutes, fell into a sleep, from which he was waked with some difficulty. The third experienced some anomalous sensations of heat and cold from the application of a pencil case to his hand, and of weight and stiffness from a piece of paper placed on his sleeve; these sensations corresponding to the will of the mesmerizer, who had previously informed the attendants that he anticipated this correspondence. The fourth patient was put asleep in ten minutes. The fifth, a nervous woman, slept at the end of twenty minutes. The sixth required but three minutes to have this effect produced, and then remained motionless for half an hour. The seventh did not sleep, but closed his eyes, and found some difficulty in opening them.—These patients had various diseases, but no benefit is stated to have been derived from the treatment.

We confess ourselves to have been unable to obtain, from the details of the above experiments, any very decisive notions with regard to the efficacy of this new remedy. Setting aside the idea of collusion, to which the nature of the results seems particularly to expose them, there are various circumstances which are calculated to diminish their apparent importance. That sleep should have occurred within two or three minutes from the commencement of the experiment, is not very easily explained; but its occurrence at the expira-

tion of twenty minutes is far from surprising. In fact, one of the patients, when asked the reason of his sleeping, attributed it to the quietness of the room, and the motion of the hands passing before his eyes. It is also remarked, that one of the number who made an effort to keep awake, succeeded without any difficulty. It is not easy to set limits to the operation of sympathy. We doubt whether any one can read Mr. C.'s experiments, amusing as they certainly are, without an irresistible inclination to yawn; we certainly experienced this ourselves; nor did we feel obliged to have recourse to mesmerism for an explanation of the phenomenon.

The singular sensations produced in some of the patients by the mere volition of the mesmerist, though curious, are still not inexplicable. It does not appear, nor do we see how it could have been the case, that Mr. C. privately communicated to those present each particular volition, before he produced the corresponding sensation. The degree of conformity between the two could be known only to himself, and with the best intention he might be deceived on this point, so that whatever was the sensation expressed, it might appear to him, whether truly or not, to be the very one he had desired. How these varying sensations were produced by the same article repeatedly applied, we cannot say; but a touch of a substance which neither felt hot nor cold in reality, might, unless this were honestly acknowledged, as it appears to have been in some instances, naturally produce

somewhat vacillating opinions in regard to its temperature. A similar effort to feel something, where nothing was to be felt, might have produced the heavy sensation of the arm on which the paper was placed, and the difficulty of rising from the seat which had been occupied but three minutes. That this was the true explanation we will not assert; but the experiments have too much the air of juggling, not to inspire a suspicion that the operator wished to deceive others, or grossly imposed on himself.

In the London Med. and Phys. Journal for September, a 4th article on the phenomena of this new agent is published by Dr Chevenix. His success, on the whole, does not appear to have increased. Two female patients were mesmerized at St. George's Hospital, London, but without any perceptible effect. The next subjects were two girls, aged nineteen and sixteen, who had both been epileptic from childhood. One of them was repeatedly operated on at Dr. C.'s house, and always with the effect of inducing sleep in from three to five minutes. To show that the sleep was not feigned, Dr. C. separated the eyelids, and displayed to the bystanders the appearances of the pupils, which corresponded to those usually observed in natural slumber. An epileptic boy was mesmerized, and an effect approaching to sleep produced in seven minutes. Some other experiments were performed at Bartholomew's Hospital, in presence of Mr. Earle. One was on an epileptic young man, whose fits were severe and frequent.

No effect was produced. A woman affected with vesical disease was submitted to its influence. She felt, at the end of five minutes, a *fluttering in her inside*, which feeling was first removed, and then renewed at the will of the operator. The next patient was a woman afflicted with iritis, for which she had been bled largely, and had undergone a mercurial course. At the end of three minutes she had an attack resembling hysteria, from which she was recovered by the regular process of mesmerizing. The operation on this patient was repeated the following day, with more violent effects.

The remaining case related by our author, and which we have reserved to the last as being the most remarkable, was that of a patient at the Dublin Hospital of Incurables. Six patients had been tried at this establishment without any effect, when a woman presented herself who for two years had not been able to walk without the aid of a crutch. After being mesmerized for thirty minutes, she expressed her belief that she could walk, and actually did so, to the no small astonishment of the bystanders. The cause of her previous inability is not precisely stated.

An apparent omission, both in the present article, and in those which Mr. Chevenix has before presented to the public, is, that they contain no precise information as to the external movements practised by the mesmerist, or what may be called the *tactics* of the science. So far as can be ascertained, however, these are very simple, and consist in little

more than the slow motion of the operator's hands before the patient. It is not in this, however, that the virtue of mesmerism is supposed to consist. The effects produced are considered as resulting from an actual correspondence between the mental processes of the mesmerist, and the physical changes produced in the patient; in other words, an effect is produced on the disease by the volition of the operator. Extravagant as this idea appears, it is expressed in terms in some of the above cases, and strongly intimated in others; and this mode of explaining the phenomena is certainly more creditable to the science, than to attribute them to the ridiculous mummery with which its votaries, like the conjurors of times past, condescend to attract the admiration of the vulgar.

As we have given our opinion of mesmerism in a former paper, it is not necessary to repeat it here at length. In reviewing these new cases, it appears that in a very small proportion only was any effect pretended to be produced. In these, with two exceptions, one consequence invariably followed,—namely, sleep, after a greater or less length of time. The probable explanation of this, supposing it to have been real, we have suggested in our former remarks; but it appears that in one case, at least, the spectators expressed a belief that the sleep was a feigned one. The occurrence of hysteria in a nervous female, who probably supposed herself to be acted on by some mysterious and powerful agent, is not much to be wondered at; indeed it is more surprising that it did

not oftener happen. In France, we are told convulsions were among the most frequent phenomena; and it argues somewhat for the *sang-froid* of the English patients, that their imaginations were so little wrought upon by the solemnity of the scene. There are probably none, however, more likely to go through an experiment on their own persons with tranquillity, than the denizens of the *incurable* ward of a hospital. To obtain such a certificate of exemption, it is generally necessary to have seen some service. With regard to the lady who so suddenly regained the use of her nether extremities, the account would be more satisfactory if the precise nature of her case was related. We are told that it was a case of vomiting caused by an injury, and that she could, with her crutch, just walk from her bed to the fireside in her own ward. Whether the lameness proceeded from the paralysis, contraction, or loss of the limb, does not appear; but if a cure was actually effected, it must have been in consequence of her unusual faith in the remedy, and must be classed with the wonders of acupuncture, and of other mysteries which have preceded this in its march to oblivion. Should we hear from Mr. Chevenix again, we shall keep our readers informed of his progress.

TETANUS CURED BY CALOMEL.

WE notice, in the London Med. and Phys. Journal, a case of traumatic tetanus treated successfully with Subm. Hyd. The amount given is not mentioned, but it was continued at intervals for four days, when the

mouth became sore; and from this time the case did well. The medicine given was combined with Opium and Ant. Tart., but the quantity of these was inconsiderable. Cold affusion was tried on the third day, but without benefit.

NEW OPERATION FOR ANEURISM.

It appears by accounts published in the journals, that six cases of aneurism have been treated on the principle recommended by Mr. Wardrop, of making the ligature beyond the seat of the disease. In two of these, Mr. W. himself tied the carotid beyond an aneurism; in a third, Mr. Lambert; and in a fourth, Dr. Bush, of New York, performed the same operation. Mr. Wardrop also tied the subclavian for aneurism of the innominate; and a Mr. Evans, of Derbyshire, treated a disease of the same vessel by ligature of the carotid. Mr. Wardrop's second patient, and the subject of Mr. Lambert's operation, both died; the other four are stated to have recovered. The rationale of the operation is sufficiently simple. Its object, in common with that of the usual practice, is to arrest the circulation in the artery, and to render impervious that portion of the vessel comprehended between the ligature and the nearest branch sent off between it and the heart. Of course, the new operation is only applicable to those cases in which the ligature can be made beyond the tumor, so as to have no branches given off from the intercepted portion. If any branch exist in this situation, the circulation will still flow into it through the tumor, and the end of the operation be de-

feated. According to this view, there are but few arteries which are favorable to the operation,—those, e. g., which, like the carotid, are for a great extent free from branches. Indeed, its advocates seem to concede that this mode of operating is not to be preferred to the other, but only to be resorted to in cases when that is rendered impracticable by the situation of the tumor.

HUMAN COMBUSTION.

In a Memoir presented to the Academy of Sciences at Paris, M. Julia de Fontanelle has furnished an account of fifteen cases of spontaneous human combustion, the occurrence of which seems to be supported by respectable testimony. He considers this combustion to depend on a very advanced and putrid degeneration of the system, which suddenly produces very combustible substances, at the expense of the muscular fibre, &c. This degeneration is considered as presenting a perfect analogy with vegetable putrid fermentation and putrefaction. The putrefaction of vegetables is known to occasion the development of so much heat as sometimes to cause their inflammation.

That human combustion does not depend on the combination with atmospheric oxygen, appears probable for three reasons:—1. There is not sufficient heat evolved. 2. There is not the production of a charcoal requiring a high heat for its incineration. 3. There are no ammoniacal products. The effects, therefore, appear to depend on a new arrangement of the elements existing in the body itself.

BOSTON, TUESDAY, OCTOBER 27, 1829.

PANACEAS.

IN our first pages will be found some account of the earlier nostrums by which the credulity of the vulgar has been imposed on. A series of numbers on the history of Panaceas and Nostrums is publishing in an English periodical, and as we have availed ourselves of extracts from the first paper, so we propose to offer our readers such parts of the succeeding ones as are deemed interesting to the profession. Perhaps no country on the face of the globe so abounds with impositions of this description, as our own. But take up any newspaper which may chance to be before you, reader, and count the different nostrums there advertised, and you may form some idea of the amount offered for sale in the whole country. A history of those *American* Panaceas and Nostrums which have, since the existence of the republic, risen into notice and been discarded, would be a subject, if not too copious, on which the pen of some member of the profession might be well employed.

The great number of such medicines, which have had their day in this country, is in one view creditable to the people. If they have been at all times quick to embrace any new remedy for a disease which it pretends, by specious certificates, to have invariably cured, it must be attributed to a weakness more or less common to all men of whatever age or nation. But the most intelligent will soonest find out the im-

sition, and thus will the succession be most rapid where there is least ignorance, and most discrimination and judgment.

The great evils, however, immediately induced by quack medicines, have fallen with a proportional weight on the people of these States. These evils are, an unnecessary and wasteful expenditure of money, and of health, and, we may also add, of life. The *physical suffering* produced by this class of medicines is well known to most practitioners, for few, if any, have not been often called to repair the ravages they have produced on the human constitution.—The amount of *money* thus foolishly lavished is immense. In this Commonwealth alone, the sums paid for quack medicines, in a single year, form a total of astonishing magnitude.

We can adduce but few *facts* on this topic, to be sure, for they are, in their nature, difficult to get at. We can say, however, that a *Stationer*, of whom we are in the habit of purchasing our paper, pays his rent, of about 700 dollars per annum, by the net profits he gets on the sale of a single nostrum, and that an article of comparatively little note, and sold in small ounce phials. What then is the amount which must be paid for this nostrum, in order to afford such net profits to a single agent! What is the probable amount paid for this same medicine, to *regular Apothecaries* and professed dealers in such articles over the whole city, and throughout the Commonwealth!

If this little phial of drops draws forth from the purses of the people such enormous sums, what must be the amount paid for other, larger, and more noted nostrums; and what the sum total annually expended for all the numerous articles of this description, with the advertisements of which our newspapers are crowded!

CHIRAYITA HERB.

Letter to the Editors of the Gazette of Health on the Virtues of this Medicine.

GENTLEMEN,—It has long been a matter of surprise to me that the herb *Chirayita*, which has been held, from time immemorial, in great estimation by the natives of Bengal and the European residents, especially the medical officers, as a powerful deobstruent and stomachic medicine, should not have been introduced into the practice of this country, especially as the variety of indigestion for which it is considered a specific (accompanied with, and probably dependent on, indolent or overloaded state of the liver) is as prevalent in this country as in the East Indies. It is said the effects of the *chirayita* are not, like stomachics in general use, confined to the stomach, but extended to the abdominal viscera, particularly the liver, which it deterges, or, as Dr. Currie observes, “emulges the hepatic ducts;” and this I believe to be a fact, for I have uniformly observed the *fæces*, during its use, to be well charged with bile, and the complexion to become clear. Although not aperient, it evidently prevents an accumulation of *fæces* in the lower portion of the intestinal canal, which Dr. Reece, in his late “Treatise on the Management of Disorders of the Stomach and Bowels by Medicine and Diet,” justly observes, is a common cause of various affections of

the lungs, head and stomach, and at the same time promotes digestion. The medicinal virtues of this herb are imparted to boiling water, and the infusion is a very grateful bitter; but the natives prefer the decoction, made by gently boiling half an ounce of the cut dried herb in a pint of water for about fifteen or twenty minutes. Of this decoction they take a small wineglassful two or three times a day. The extract, which also contains the virtue of the herb in great perfection, is taken in form of pills. It is likewise administered by the Indian practitioners in cases of pulmonary consumption and *scrofula*. Of its efficacy in the former malady, I cannot speak from experience; but on the latter malady, I have frequently witnessed its salutary effects. The experienced and scientific physician, Dr. Fleming, late of Bengal, speaks highly of the *chirayita* as a tonic medicine. Dr. James Johnson, in his work on tropical diseases, also gives it a high character; and Mr. Addison, the author of a Treatise on the Malvern Water, says, that from the very beneficial effects it had on himself, it is a valuable addition to the class of stomachic medicines.

I am, Sirs, your very obedient servant,
THOS. BAKER.

Laurel Water in Epilepsy, by Dr. MULLER.—A young girl, twenty-two years of age, had been epileptic for six years. The attacks frequently returned twice in one day; they were of short duration, and in the intervals the patient had spasms in her arms, and moved her fingers in a convulsive manner. She had been for eighteen months bedridden, unconscious of her state and actions, eating and drinking anything offered, but asking for nothing, and passing her stools involuntarily. A variety of means were tried without effect, and all of them, but particularly large bleedings, appeared to be hurtful. M. Muller was called, and found the

patient in this state. She had always been regular in menstruating, and had never had any but the ordinary diseases of infancy, and never any chronic eruptions of the skin, nor worms. The tongue was soft and moist, belly pliant, respiration natural. Not being able to find any cause for this disease, M. M. thought of employing laurel water, from which he had often derived great advantages in nervous affections similar to this. He prescribed it in the dose of twenty drops daily. After the consumption of an ounce, the convulsive movements of the limbs had completely ceased; and after the administration of three ounces more (augmenting each dose to two drops, till the dose was eighty drops), the attacks of epilepsy never returned. The patient having recovered her sensibility, left her bed, and executed spontaneously every function. The treatment was concluded by an infusion of Valerian, with the addition of Træ. Canellæ and Liquor Ammoniacæ; and, after using for some time some preparations of iron, she quite recovered her health.—*Rev. Med.*

Vegetable Rouge and Pink Sauces.—These articles are prepared from the florets of the *Carthamus tinctorius*, which in the dried state are kept by druggists under the name of safflower, in the following manner:—Wash safflower till no stain is given to the water, and then dry it. Of this take half an ounce; infuse it a short time in a pint of water, in which a drachm of the subcarbonate of soda has been previously dissolv-

ed; strain off the liquid, to which add an ounce of finely levigated French chalk. The alkali will hold the coloring matter of the safflower in solution, and the chalk will remain colorless; but by adding a little tartaric or citric acid, the alkali will be neutralized, and the red coloring matter, which is not soluble in simple water, being set at liberty, will fall to the bottom, combined with the chalk. Thus a beautiful pigment is produced, which may be dried and further levigated for spreading on saucers; or, ground with a drop or two of olive oil, will form the Spanish or vegetable rouge. Liquid pink dye is a similar preparation, with a portion of spirit of wine.

Black Writing Ink.—Most of the directions for making ink which we have seen, direct that vinegar should enter into its composition. It is well known, however, that any preparation of sulphate of iron and galls, when mixed with an acid, must, in process of time, become more or less of a pale red.—The following recipe, which we had personally from a celebrated chemist, is not subject to this objection, and from long experience of its excellence, we recommend it with confidence to our readers:—

R. Aq. Dist. bull. lbj. adde grad.
Acaciæ Gum. pulv. ʒ iss.
Hæmatox. rasæ,
Gallæ pulv.
Sulph. Ferri. aa ʒi. M.

This compound should be left exposed to the air, and frequently stirred, about three days, when it will be fit for use.

WEEKLY REPORT OF DEATHS IN BOSTON, ENDING OCTOBER 16.

Date.	Sex.	Age.	Disease.	Date.	Sex.	Age.	Disease.
O. 9.	M.	48 yrs	drowned		M.	21 mo	dropsy on the brain
10.	F.	36	unknown	12.	F.	19 yrs	measles
	F.	35	colic		F.	16	typhous fever
	M.	13 mo	lung fever	13.	F.	2 1-2	lung fever
11.	M.	12	teething	14.	M.	2	measles
	M.	51 yrs	intemperance		F.	18 mo	inflammation on the brain
	F.	27	unknown		M.	35 yrs	typhous fever
	M.	8	abscess on the brain	15.	M.	24	do.
	M.	45	apoplexy		M.	2 1-2	do.
	M.	37	liver complaint	16.	F.	20	consumption
	F.	58	dropsy		F.	40	dropsy
Males, 12—females, 10.				Total, 22.			

ADVERTISEMENTS.

ANATOMICO-SURGICAL DRAWINGS, and Descriptions of all the Surgical Operations, according to the most approved methods. By L. J. VON BIERKOWSKY. Translated from the German. In two volumes, and 570 drawings on 58 folio plates.

EXTRACTS FROM THE PROSPECTUS.

"Encouraged by the approbation of the Medical Profession, it is proposed to publish a work under the present title."

"This work contains 570 drawings, on 58 plates folio; to which is annexed, in two volumes 8vo. a concise explanation of each surgical operation. The plates exhibit not only the parts interested in operations, in their natural position and size, but, what is much more important, represent the different acts or stages of the whole operation, while others exhibit delineations of such morbid affections as consist in the change of the natural position, structure, color, &c. In order to afford the work at a moderate price, the plates will be Lithographic; and for the purpose of securing perfect accuracy, engagements have been entered into for their preparation in Berlin, under the especial direction of two of the most distinguished Professors of the University of that city."

A specimen of the translation, and the plates, is deposited for inspection at the Bookstore of CARTER & HENDEE, who receive subscriptions for the work.

Subscribers will be furnished with the work, and the first impressions of the plates, at the price of \$30.

The subscription list will be open until the 1st of November, 1829, after which period the price of the work will be raised to \$40.

P. S. For the accommodation of subscribers the work will be issued in five Numbers, at \$6 each, payable on delivery. Sept. 29. 18202N1D.

LEECHES, CHIRAYITA HERB, &c.

EBENEZER WIGHT, 46 Milk Street, has made such arrangements as will enable him to be constantly supplied with the genuine *Medicinal Leech*. He has now on hand some of very large size, and in prime order.

Just received, by late arrivals, a few pounds of *Chirayita Herb*.—Concentrated Compound Decoction of *Sarsaparilla*.—

Laurel Water,—Silver Wire Tooth Brushes, from the manufactory of James Froust, of London.

Also, from the manufactory of Shepherd, of London, the following variety of *Medicated Lozenges*, viz.:—Coltsfoot—Rhubarb—Soda—Tolu—Heartburn—Paregoric—Magnesia—Steel—Camomile—Nitro—Cayenne—Opium—Fruit—Ginger—Aniseed—Ipecacuanha—Lemon—Rose—Peppermint and Sulphur.

*** Strict personal attention paid to Physicians' prescriptions, and family medicines. Oct. 6. eop.

CARTER & HENDEE have just published,—The Constitution of Man, considered in Relation to External Objects. By GEORGE COMBE.

From the Preface to the American edition.

"Mr. Combe's work should be placed with those, of which so many within a few years have appeared, which are devoted to the all-absorbing topic of Education. It treats of moral, intellectual, and physical education. This is not formally done under so many distinct heads. But the whole course of reasoning of the author, and the whole array of all his illustrations, have it always obviously in view to show how the highest cultivation of each of these may be most surely brought about.

"The publishers have printed this edition from a belief that there is much in the work to interest the community.

"It has a novelty to reward the general inquirer, and it presents the well known under novel aspects. There is one class amongst us who may study it with much advantage. Scholars are referred to, a class here too small to form a distinct order with habits of their own, and who insensibly fall into those which, although not mischievous, to the multitude on the score of health, too often make ill health the portion of the sedentary student, and bring upon him premature decay.—To all classes it is recommended, and the various learning and acuteness of the author well fit him to write a book which addresses its instructions to the whole community." Sept. 8.

ATREATISE on the Scrofulous Disease, by C. G. HUFELAND, Physician to the King of Prussia, &c., translated from the French of M. Bousquet, by Charles D. Meigs, M.D., is just received and for sale by CARTER & HENDEE. Sept. 8.

Published weekly, by JOHN CORROD, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

Vol. II.]

TUESDAY, NOVEMBER 3, 1829.

[No. 38.]

I.

HISTORY OF PANACEAS AND NOSTRUMS.

(Continued from page 577.)

Quicksilver and Tar-water.

THE use of crude quicksilver was revived about the year 1730. "Some," says a writer of that day, "got marvellous benefit, others wondrous mischief, and to many that left off in time, it did neither good nor harm." Dr. Turner declared, that "the deglutition of a ponderous metal was a great folly," and exhibited the "sundry tragedies which it had produced." Booth, the celebrated tragedian, performed one of these tragedies in real earnest; for having taken it, "he had his bowels mortify from one end to the other." Dr. Dover gave it great fame in his "Legacy." Dover was an A.B., and a pupil of Sydenham, but became by natural disposition a sheer curemonger, and, like all his fraternity, an unexceeded story-teller. He regarded diseases neither anatomically nor physiologically, and was, therefore, a mere conjecturist. In his practice, he asserts positively that he had cured consumption by using fifty bleedings, and diabetes by giving alum posset; and he speaks of administering opium in forty-and-seven grain doses! What he calls "solid experience" is nothing else but a tissue of those falsehoods and im-

possibilities with which such men deceive themselves and the world, helped along by a few shrewd catches upon popular notions, which give this sort of orthodox quacks an air of sagacity, but without one sound or valuable observation tending to improved views of any subject. If what he says of his practice be true, for one cure mentioned in his book he must have killed in a hundred cases, which he took care to leave out. He was just the man to get a Bath and Cheltenham reputation, among the rich, as a noted performer of cures, and was accordingly much esteemed by the nobility, and was even sent for to the Methuens, Tracys, and other distinguished families. Mere people of fashion are precisely the materials to be imposed upon.

In his reply to Turner and Brindley, in "The Legacy," he makes the "Hydrargyrus" to say for itself, that "it could not fill an empty cavity in the head with brains; but that, if it could not make a lodgment in so solitary and unfurnished an apartment, the owner need not be under any apprehensions, for fools were never known to go mad. Free from all agitating thoughts and doubts, they enjoy a profound tranquillity of mind, and are happy in an undisturbed conceit of being extremely wise." He apparently alludes to those antagonists who had raked him most

fore three o'clock, the Fire King made his appearance near his oven, and as some impatience had been exhibited owing to the non-arrival of Mr. J. Smith, he offered to amuse the company with a few trifling experiments, which he said any of them might perform with the greatest ease.—He then made a shovel red hot, and rubbed it over his tongue,—a trick for which no credit, he said, was due, as the moisture of the tongue was sufficient to prevent any injury arising from it. He next rubbed it over his hair and face, declaring that any body might perform the same feat by washing themselves in a mixture of spirits of sulphur and of alum, which, by cauterizing the epidermis, hardened the skin to resist the fire. He then put his hands into some melted lead, took a small portion of it out, placed it in his mouth, and then gave it in a solid state to some of the company. This performance, according to his account, was also very easy ; for he seized only a very small particle, which, by a tight compression between the finger and thumb, became cool before it reached the mouth. By the time that these "little tricks," as he called them, were performed, another call was made for Mr. Smith's appearance. The Fire King looked around the room, and seeing the bashful countenance of his challenger in one corner of it, called him from his retirement, and pointed him out to the notice of the audience. The challenger being on the ground, the time for trifling was now over, and M. Chabert forthwith prepared himself for mightier undertakings.—A cruise of oil was brought forward and poured into a saucepan, which was previously turned upside down, to

show that there was no water in it. The alleged reason for this step was, that vulgar conjurors, who profess to drink boiling oil, place the oil in water, and drink it when the water boils, at which time the oil is not warmer than an ordinary cup of tea. He intended to drink the oil when any person might see it bubbling in the saucepan, and when the thermométer would prove that it was heated to 360 degrees. The saucepan was accordingly placed upon the fire, and as it was acquiring the requisite heat, the Fire King challenged any man living to drink a spoonful of the oil at the same temperature as that at which he was going to drink it. In a few minutes afterwards, he sipped off a spoonful with the greatest apparent ease, although the spoon, from contact with the boiling fluid, had become too hot for ordinary fingers to handle. "And now, Monsieur Smith," said the Fire King, "now for your challenge. Have you prepared yourself with phosphorus, or will you take some of mine, which is laid on that table?"

Mr. Smith, who is a thick-set man, of middle size, walked up to the table, and pulling a phial out of his pocket, offered it to the poison-swallower.

The Fire King.—I ask you, on your honor as a gentleman, is this genuine unmixed poison?

Mr. Smith.—It is, upon my honor.

A person in the room requested that Dr. Gordon Smith, one of the Medical Professors in the London University, would examine the phial, and decide whether it contained genuine phosphorus. The learned Professor went to the table,—on which a formidable collection of poisons, such as red and

white arsenic, hydrocyanic acid, morphine, and phosphorus, were placed,—and examining the phial, exclaimed that, to the best of his judgment, it was genuine phosphorus. This did not content several gentlemen in the room : they desired to see whether it would ignite by friction. The experiment was made, and a small piece soon set the paper in which it was wrapped into a flame. The same experiment had been tried on the Fire King's own phosphorus; and if they may judge from the volume of flame which it sent forth, his phosphorus was stronger than that provided by Mr. Smith. The reality of the poison being thus ascertained, M. Chabert asked Mr. Smith, with great politeness, how many grains he wished to commence his first with.

Mr. Smith.—Twenty grains will do as a commencement.

M. Chabert.—Ah, my good Sir, it is a very small dose ; I shall not object to take a pound or two,—will you weigh the quantity yourself ?

Mr. Smith declined.

A medical gentleman then came forward, and cut off two parcels of phosphorus, containing twenty grains each. He was placing them in the water, when the Fire King requested that his phosphorus might be cut into small pieces, as he did not wish the pieces to stop on their road to the stomach.

The poisons were now prepared. A wineglass contained the portion set aside for the Fire King,—a tumbler the portion reserved for Mr. Smith. It would be difficult to say whether the challenger or the challenged at this moment showed the greatest composure. This may be safely said,—they were at this moment the two least agitated persons in the room.

The Fire King.—I suppose,

gentlemen, I must begin. Well, then, to convince you that I do not juggle, I will first of all take off my coat, and then, as another precaution, I will trouble you, Doctor (speaking to Dr. Gordon Smith), to tie my hands together behind me.

After he had been bandaged in this manner, he planted himself on one knee in the centre of the room, and requested some gentleman to place the phosphorus on his tongue, and pour the water down his throat. This was accordingly done, and the water and the phosphorus were swallowed together. He then opened his mouth, and requested the company to look whether any portion of the phosphorus remained in his mouth. Several gentlemen examined his mouth, and declared that there was no phosphorus perceptible, either upon or under his tongue. He was then, by his own desire, unbandaged. The Fire King then turned to Mr. Smith, and offered him the other glass of phosphorus, with a ceremonious politeness which was highly entertaining. “And now, my good Sir, I shall have great pleasure in seeing you take off your glass too.”

Mr. Smith started back in infinite alarm ;—“Not for worlds, Sir, not for worlds ; I beg to decline it.”

The Fire King.—Eh ! mon Dieu ! you decline it ! Oh ! dear Sir ; no, no ; you drink von little glass to oblige the company.

Mr. Smith.—The company must excuse me. I don't often drink in a morning, and least of all such ardent spirit as phosphorus.

The Fire King.—Then why did you send me a challenge ? You have pledged your honor to drink it if I did. I have done it ; and if you are a gentleman, you must drink it too.

Mr. Smith.—No, no ; I must

be excused: I am quite satisfied without it.

Here several voices exclaimed that the bet was lost. Some said that there must be a confederacy between the challenger and the challenged, and others asked whether any money had been deposited.

The Fire King called a Mr. White forward, who deposed that he held the stakes, which had been regularly placed in his hands by both parties, before twelve o'clock that morning.

The Fire King here asked Mr. Smith if he intended to go into the oven with him?

Mr. Smith replied that he could answer that question better after he saw the Fire King come out.

The Fire King.—But my good Sir, that makes no matter, for you have lost your bet already, if you do not swallow the phosphorus. Are you satisfied on that head?

Mr. Smith admitted that he was.

The Fire King here turned round with great exultation to the company, and pulling a bottle out of his pocket, exclaimed with great good feeling, "I did never see the gentleman before this morning, and I did not know but that he might be bold enough to venture to take this quantity of poison. I was determined not to let him lose his life by his foolish wager, and therefore I did bring an antidote in my pocket, which would have prevented him from suffering any harm." *Le voila!* Ah, ah, my good Sir, you pay your £50 to see me take the phosphorus. Now you shall take three or four grains yourself. I will give you von little wineglass out of this bottle, and you shall be as well in a few minutes as you are now. Do, Sir, oblige me by taking a few grains."

Mr. Smith begged to be excused.

His object was answered in seeing 20 grains of genuine phosphorus actually swallowed. He had conceived it impossible, as three grains were quite sufficient to destroy life.

The Fire King then addressed the gentleman who had meted out the phosphorus. "Perhaps you, Sir, will have the goodness to swallow a little bit to amuse me. I pledge you £1000,—I pledge you my life, that if you take a little of this bottle, it will not do you any harm.

The gentleman turned pale with affright. "I must beg to decline your polite invitation," he stammered out at last, "for in case of accident, I am afraid the pledge of your life would not keep my wife and family."

The Fire King.—Now, gentlemen, I will prove to you by another little experiment, that I have no phosphorus in my mouth. *Attendez un peu.* Put me a small piece of phosphorus on a knife point, and bring me a candle.

A candle was brought him, and he lighted it with the phosphorus. Part of the phosphorus fell on the ground, and was extinguished after some trouble.

The Fire King.—Ah, Mr. Smith, you are very good to me. You bring me the very good phosphorus; I am much obliged to you, Sir. Now give me a torch and a fork.

They were given to him accordingly. He took a small piece of the burning torch on his fork, put it into his mouth and swallowed it. "And now, gentlemen, I have done with the poison for to-day." Having said this, he withdrew into another room, for the professed purpose of putting on his usual dress for entering the oven, but in all probability for the real purpose of

getting the phosphorus, by some antidote, from his stomach. Zinc is the usual antidote for phosphorus; but he says that it is not the antidote which he uses, and declines to mention what is. We were informed that some eminent physicians asked him, a few days ago, if he would have any objection to have the poison taken off his stomach by the stomach pump; and that he replied that he should have no objection, provided that, in analyzing the contents of his stomach, they would be satisfied with ascertaining the existence of the poison, and would not seek to ascertain the nature of his antidote, which was so simple in its nature, that when it was once known, every apothecary's boy could provide it. He has repeatedly taken all the different poisons which were placed upon his teeth. On one occasion, when he was exhibiting before the Duke of Norfolk, he took a teaspoonful of prussic acid; but that experiment he says he never will repeat again; for it is a poison which not only requires the antidote to be taken first, but it is also so rapid in its operation, that it may destroy life before the antidote can produce its effect. He said that he should never forget the feelings which came over him as soon as he had swallowed it;—every vein in his head appeared to swell, and "each particular hair," he said, "stood erect, like quills upon the porcupine."

Immediately after Mr. Smith had declined to take the phosphorus, several gentlemen surrounded him, desiring to know why he had inserted such advertisements as he had done in the public papers, if he had no intention to perform the feats to which he had

dared the Fire King. To this he replied, that his object had been to ascertain beyond all doubt, whether it was possible for any person to take such a mass of poison, and live,—that he should not have risked such a sum of money of his own, on such a challenge as that which he had given; but that he was acting as the representative of a number of scientific gentlemen, who had subscribed such a sum as would enable him, if his challenge were accepted, to insist upon furnishing the poison himself, and upon seeing every step taken by the Fire King before and while he swallowed it. He stated that he was now perfectly convinced that the phosphorus was actually swallowed. He likewise protested that there had been no collusion between him and the Fire King. This protestation was subsequently repeated by the Fire King himself, who added, in confirmation of it, that he could have no interest in drawing a large concourse of people to his room. He was paid a certain sum per week by Mr. Welsh, and whether there was one person in the room, or whether there was 20,000, was to him, as far as his own emolument was concerned, perfectly immaterial. M. Chabert stated, that after the pledge which Mr. Smith had given the public in his advertisement, he fully expected to have been put to a fair trial of his powers in the course of the day, and that he had in consequence made preparations and alterations in his course of action, which one way or another would cost him upwards of £20.

After an absence of twenty minutes, M. Chabert returned, dressed in a coarse woollen coat,

to enter the heated oven. Before he entered it, a medical gentleman ascertained that his pulse was vibrating 98 times in a minute. He remained in the oven for five minutes, during which time he sung "Le Vaillant Troubadour," and superintended the cooking of two dishes of beef-steaks. At the end of that time he came out, perspiring profusely, and with a pulse making 168 vibrations in a minute. The thermometer, when brought out of the oven, stood at 380 degrees; within the oven, he said it was about 600. He had never been exposed to such intense heat before. After performing this feat, which was the last exhibition of his powers, he remained on the steps leading to his oven for some time, conversing with the company. In the course of his remarks, he observed, that before he left England he should have a benefit in the room for himself, when he would astonish the world by performing something still more extraordinary than anything which he has yet done.

II.

CANCER OF THE STOMACH.

Some account of the progress and fatal termination of a case of Cancer of the Stomach, is given in the Provincial Gazette, by Charles Mayo, the distinguished Surgeon of the Winchester Hospital. The following sketch of this case is given in a London Journal.

A CATHOLIC priest, sixty-two years of age, of plethoric frame and sedentary habits, had long been subject to dyspepsia, with constipation; to which were add-

ed rheumatic pains of the limbs, and a "harshness" in the throat, with a relaxed state of the velum pendulum palati. He had much languor, and considerable dyspnoea. His pulse was 60, full and regular. These symptoms continued to increase during the summer, notwithstanding the use of various remedies, such as full bleeding, aperients, squill, astringent gargles, &c. At the end of July he went to France, where he remained for a month, and during this time recruited very much, recovering his appetite, as it appears "that the French cookery was more agreeable to his stomach." On his return he visited London, and took the benefit of Dr. Armstrong's advice, who prescribed the solution of chlorine, in doses of from 40 to 60 drops three times a day, the bowels being kept open by equal parts of blue pill and colocynth. He also directed a small quantity of blood to be taken from the arm occasionally.

No benefit having been derived from these means, the muriated tincture of iron was exhibited Oct. 11th, and afterwards, Nov. 13th, the Mist. Ferri Comp., which last he continued to take till the middle of January, together with Mx. of the black drop at night. Under this treatment he recovered so far as to give sanguine expectations of his restoration to health; but about the middle of February the loss of appetite and nausea returned, and on one occasion he vomited a large quantity of a brownish fluid, with an acid, offensive taste. An emetic, which was administered, produced no evacuation of any moment. He was now directed to take sulphate of quina, in doses

of two grains, three times a day, which he did without benefit.

He became extremely weak, and complained much of pain in his throat and the back part of his neck. He vomited, March 15th, nearly a wash-hand basin full of dark offensive matter, like the former; and this symptom afterwards returned several times, his food being frequently rejected. "He had been frequently examined by pressure on the epigastrium and hypochondria, with a view to detect some suspected disease in the abdominal viscera, but without success. I now discovered a large pulsating tumor beneath, and a little to the left of, the ensiform cartilage, and pointed it out to Dr. Crawford and Mr. Lyford, who had been added to us in consultation. Various ideas suggested themselves to us as to the nature of the tumor, such as aneurism of the aorta, diseased liver, pancreas, &c., and we were inclined to suppose it might have some sort of cyst attached to it, and communicating with the stomach, as the source of the offensive fluid thrown up by vomiting. Pressure on the swelling gave little or no pain, neither did he suffer any at other times, except from the violence of the vomiting.

From this time he continued progressively to sink, and died April 9th. The following appearances presented themselves on dissection, which took place the day of his decease:—

"At five this afternoon, I proceeded to lay open the cavities of the thorax and abdomen, assisted by Mr. Lyford and Dr. Crawford. The integuments were thick with fat; the omentum, spread over the intestines, was

quite loaded with it, and, on raising the sternum, we found the mediastinum and pericardium were equally burthened with fat; the stomach was large and distended with air; the tumor was readily felt, but it was so enveloped with the fat of the great and lesser omentum, as to render it impossible to ascertain the nature of it till these were removed; it was then clearly seen to be connected with the pyloric extremity of the stomach, and, on removing this viscus and laying it open, we found a carcinomatous enlargement of the pylorus, equal in size to a pint jug, loaded with fat externally, and presenting an ulcerated surface internally, with a highly vascular fungus protruding from it, of a brain-like consistence: on making a section of the tumor, it exhibited a complete scirrhus texture, and, from its density and thickness, must have weighed nearly two pounds. A few ounces of the black fluid were contained in the stomach, and no doubt the ulcerated surface of the scirrhus must have been the source of this morbid secretion: the pulsatory motion of the tumor was of course communicated by the aorta, upon which it rested. The heart was fat, but its muscular structure thin and soft, so that it appeared smaller than the general bulk of the body would have led one to suspect; the aorta, on the contrary, seemed larger than natural, but on splitting it down with scissors, the only morbid appearance was the large size of the celiac artery branching from it, and, around its origin, a deposit of bony matter. Probably the great size of this vessel, from whose branches the diseased mass must have

been supplied, may account, in some measure, for the profuse secretion which seems to have been constantly poured into the stomach from the ulcerated and fungous surface; sanguineous exudation and sloughs broken down, had probably imparted the dark color and offensive odor to the ejected fluid: a considerable slough was drawn out from the orifice of the pylorus, through which the finger readily passed into the duodenum. The liver was studded with white tubercles, about the size of a hazel-nut, both on the surface and within its substance; the peritoneal surface of the diaphragm, contiguous to the liver and the tumor, was quite rough with minute granular tubercles. The bowels were nearly empty. The kidneys were healthy, but covered with an immense accumulation of fat, which extended down the loins into the pelvis, and across to the mesentery, rendering it unusually thick.

"Mr. W. had retained his usual appearance of obesity till within the last month or six weeks, but since the frequent vomiting came on, he became rapidly emaciated. From these circumstances, we may perhaps conclude that the scirrhus became ulcerated at this period, and that its fatal progress was much accelerated by frequent excitement in the act of vomiting. It may perhaps be worth while to observe, that Mr. W. was of a florid complexion, and that his mother died of cancer in the breast,—from which circumstance he always apprehended himself to have an hereditary tendency to that disease; and it may be curious to speculate, whether the rigid observance of the discipline of his religion may

not have had some tendency to determine the morbid action to the stomach."

III.

ON PRESSURE AS A SURGICAL REMEDY.

By Mr. W. J. WICKHAM, Surgeon to the Winchester Hospital.

MR. WICKHAM considers the action of pressure under three distinct heads;—first, as a means of suppressing hemorrhage, and causing a temporary interruption of the circulation; secondly, as producing absorption; thirdly, as an adjuvant to other remedies in giving support to parts which require it.

"Pressure may be resorted to in the most desperate cases of hemorrhage from a large branch of an artery or trunk, but the benefit to be derived from it will entirely depend on the manner in which it is applied. The proper exertion of compression in this case, implies a correct knowledge of the course of the vessel which requires it, the selection of the most desirable spot on which it is to be used, and the fulfilment of that object alone, without injury to other parts. For the want of a correct knowledge of the course of the femoral artery, I have witnessed serious hemorrhage during amputation, the circular pressure being applied with the greatest degree of force which the screw would allow of, but the compress which should have been applied over the artery, being placed away from its course.

"Within these few days, a case of wound of the posterior tibial artery, near the malleolus, was brought into our hospital.

The patient had sustained very copious discharges of blood, and I think he could not have borne another jet from the vessel. The tourniquet had been applied over the posterior tibial artery above the wound, instead of the femoral, and but very inefficient pressure had been made on the bleeding wound. By this, though the blood did not issue from the upper extremity of the artery, yet the anastomosis afforded a large supply, by which the lower end bled to a very great amount. I immediately placed ligatures on both ends of the artery, and secured it from further bleeding. Here, then, the tourniquet had been misapplied, and rendered inoperative on the bleeding artery; and the parts about the wound had been bruised and injured, by an effectual compression of ten days, during which time hemorrhage was, from time to time, going on, being only arrested by the occasional formation of a coagulum, and returning whenever it was removed. The objects to be obtained in securing the bleeding vessel are, 1st, to close the orifice from which the blood issues, and secondly, so to suppress the force of circulation in the vessel, as to prevent the removal of coagulum which forms around it. In all cases it is most desirable to put ligatures on an artery, if it can be discovered at the wound; but in failure of this, which frequently happens, from the many difficulties occurring at these times,—difficulties which are known only to those who have experienced them,—the firm compression of the vessel may be resorted to. The part from which the blood flows should be covered with a firm compress, just large

enough to prevent the further escape of blood, and be pressed against the most resisting part; i. e., the nearest bone. Upon this, larger compresses should be applied, so as to press the greatest force on the bleeding part, which should be gradually increased as the surrounding parts recede from the wound. Over this a bandage is to be applied, rolled lightly from the lower extremity of the limb, and, gradually increasing its tightness as it approaches the wound, is to be carried on some way above it. In addition to this, it is well to apply a tourniquet on the main vessel for a few hours, which lessens the force of pulsation at the wound, and aids the formation of the coagulum.

“In the lower extremity, the anterior tibial artery may be compressed without fear throughout its whole course; also the posterior tibial, as high as the middle of the leg; but I think its calibre is too large, higher, to be treated by compression only. In the upper extremity, I would not confide in pressure higher than the brachial artery at the bend of the elbow.*

“I have several times observed very serious effects, the consequence of ill-directed pressure, for the suppression of hemorrhage from the temporal artery, where it has been opened in the common way of taking blood from that vessel. The cases have been of this nature;—after opening the temporal artery, and abstracting the desired quantity of blood, a compress, much larger than the wound, has been placed over it,

* See the excellent observations by Mr. Smith, of Bristol, on the wound of that vessel, at the bend of the elbow.

which for a time has succeeded in stopping the bleeding. After a few hours, perhaps, on exertion, or from some other cause, hemorrhage has come on, and instead of making a more immediate pressure on the vessel, the same compress has been continued, and the bandage tightened to a great degree. This has also for a time answered the purpose, but on its becoming in the least loosened, bleeding has recurred, and in this way a large quantity of blood has been lost at different times, the pressure having been applied to the surrounding parts rather than to the wounded artery. The parts, by this, have suffered so much injury from the compression, that inflammation of an erysipelatus character has supervened, which has sometimes terminated fatally.

"Large veins are occasionally wounded, and furnish a very considerable quantity of blood, which may be suppressed by the application of forcible and well-exerted pressure.

"It will be considered that the veins are not so liable to secondary hemorrhage as the arteries, whose pulsation is apt to force off the coagulum which may be formed; they therefore will be more readily and completely secured by compression. In addition to this, where veins are wounded, it will be borne in mind, that pressure should be adopted, in preference, where it can be confided in, to ligature, from the dangerous consequences which often attend on the latter."

With regard to the second application of pressure,—namely, for the purpose of causing the absorption of newly deposited or diseased parts, it is necessary to

keep in mind, that if the pressure be adopted to a certain extent only, the action of the arteries is increased, and instead of causing the removal of the part, an increase is the result; but if it be more firmly applied, so as to check arterial action, and impede the circulation through them, absorption must follow. "Pressure operates in this ratio;—in a slight degree, the arteries become stimulated, more blood is sent to the part, and deposit is the result; but if it be exerted to a greater degree, the bloodvessels are lessened in their calibres, and less blood circulates in the part: the absorbent vessels likewise, no doubt, in this case receive the stimulus, and become more active."

The author proceeds to make some observations on the plan of treating cancer by pressure, as recommended by Mr. Young. The results of his experience are not favorable to the opinion that the disease can be thus removed; and this corresponds to the general inference which has been drawn by the profession. Mr. Wickham thus continues:—

"There is a species of ulcer, in the cure of which, pressure, if properly applied, has a very decided and satisfactory power,—I mean the ulcer with callous edges. The usual denomination used for this sore, is that of *indolent*. The consequence of this term being employed, without reference to the cause of the sluggishness, is, that the sore is treated by stimulating means, which only prolong, rather than expedite its cure. The state of the sore appears to me to be this: the surrounding parts are in a state of chronic inflammation; the weak-

ened, distended, and overcharged vessels, are constantly depositing fresh matter at the edges of the sore, by which a firm band is at last formed, so as effectually to prevent the further progress of these vessels towards the sore itself; the effect of which is, that the sore is ill supplied with blood, and absorption, that is, the ulcerative process, proceeds, without admitting of any check from stimuli. Pressure in this ulcer

operates by compressing the vessels of the surrounding parts which supply the callous edges with fresh matter: thus, by reducing them to an ordinate and healthy action, the further deposit is put a stop to, and the edges become absorbed; the vessels then find their way to the sore, which now assumes a state of health and activity, and by it the process of healing is ultimately completed." *Provincial Med. Gaz.*

SKETCHES OF PERIODICAL LITERATURE.

INTERMITTENT FEVER.

THE depletory mode of treating this disease, which has lately been much the subject of discussion, is strongly advocated by Dr. BELL, of Philadelphia, in a paper on the subject published in the N. A. Journal. Dr. B. recommends the use of the lancet both in the cold and the hot stage, and even during the intermission, provided pain in the head and tenderness of the epigastrium be present. For other remedies during the hot stage, he advises cold affusion or immersion, and the use of cool acid beverage.

Dr. B. condemns the use of bark during the intervals of fever, unless the apyrexia be perfect, and the patient free from gastric irritation. When this is the case, full doses of the bark may be given, and repeated at short intervals. If, however, the disease is found to retain its paroxysmal character, and the head and stomach are distressed, this medicine must be omitted, and recourse again had to the lancet. This treatment

of Dr. B. is certainly a very remarkable one. It is a most signal illustration of the extent to which a man's reasoning may carry him, in opposition to innumerable facts and protracted experience. Although this disease may sometimes yield to the abstraction of blood when that fluid is accumulated in the internal organs, it is, we apprehend, too late in the history of medicine for the profession to be told that the lancet in all stages, and even the intermission of this malady, is the appropriate remedy; or that the paroxysmal character is not the clearest possible indication for the use of bark.—Dr. B. is of opinion that no other tonic is likely to succeed in that state of the stomach in which the cinchona and quinine fail, and that the treatment with arsenic is very hazardous, and frequently followed by permanent injury to the system. Some of the most obstinate cases of relapse which Dr. B. met with, were those in which the disease had been checked by the use of the min. solution.

With regard to intestinal evacuations, the author is not disposed to estimate their value very high. An emetic is sometimes required at the onset of the disease, but not always, and one or two cathartics are all which are usually needed. The best articles for this last purpose are, senna, manna, and the supertartrate of potash. Epsom salts are also a useful purgative, and possess the advantage of acting within a short time,—a circumstance which is often of considerable importance.

DELIRIUM TREMENS.

THIS disease forms the subject of a paper in the October No. of the N. A. Journal. The views which are taken, both of the nature and treatment, correspond, for the most part, with those of Dr. Coates, as expressed about two years since in the same journal. The author considers it a disease of debility, and condemns general bleeding in strong terms. The treatment suggested, consists in the exhibition of cathartic medicines, so as to produce free alvine evacuations; and subsequently of opium, until sleep is obtained. Dr. Coates advanced the assertion, that opium had never been known to produce any dangerous consequence. A case is cited by this author, which forms a striking and important exception to this remark.—A patient was ordered twenty drops of the acetum opii, every hour. He took it constantly for three days, when it produced stupor and a state resembling apoplexy. In this case, had sleep supervened at any hour of the seventy-two during which the narcotic

was administered, it would doubtless have been attributed to its influence. Yet the question might naturally have suggested itself, whether this was anything more than the spontaneous termination of the disease, without reference to the remedy. It is a fact well worthy of consideration, that where opium is given to produce sleep in delirium tremens, this effect is rarely found to supervene on the first doses, however considerable; yet it will usually happen, if the medicine be persevered in, although the doses be not much increased. That in most cases the sleep is owing to the opium taken, there is no doubt; but in some we are inclined to suspect, that it occurs when the morbid action has spent itself, without having been at all induced by the treatment. We have heard of cases of this disease left entirely to nature, which terminated favorably; and we know there are practitioners who treat it wholly without narcotics, and consider themselves very successful. In our own practice we have usually adopted Dr. Coates's system, and for the most part with fortunate results.

CRUSTA LACTEA.

It has generally been considered that Crusta Lactea is connected with dentition, and that it occurs about the time when that process commences. A writer in the N. A. Journal,—Dr. Mitchell, of Frankford, Pa.,—considers this opinion to be founded in error. He gives the particulars of a case which occurred in his own family, commencing when the child was three months old, and

continuing for five months. It seemed to be occasioned by the diet of the parent, who had confined herself almost exclusively to animal food. This idea was confirmed by noticing that when the child was permitted to suck and swallow the juice of meat, the disease was always aggravated. Various remedies, both external and internal, were employed without advantage. The greatest benefit was derived from the exhibition of calomel and chalk, and from the external use of the following ointment:—

R. Adip. Ss.
Subm. Hyd. āā ss.
Sulphur Sub.
Lap. Cal. āā ʒi. M.

This plan of treatment appeared to contribute essentially to the cure.

RHEUMATISM CURED BY ACETATE OF MORPHIA APPLIED TO A BLISTERED SURFACE.

A FRENCH Journal, *La Clinique*, contains a history of two cases of rheumatism successfully treated by this endermic practice. The first occurred in an individual of advanced age and robust frame, who had been subject to the chronic form of the disease for twenty years, complicated of late with some obscure disease of the spine. Occasional pain and sudden loss of power in the left leg, with other indications of paralysis, led to the employment of strychnia, which was relieving the disease, when, learning that it was a powerful remedy, he declined using any more. On the 2d of July, violent pain and convulsion of the limb came on. His physician, by means of ammonia, procured in ten minutes

a blistered surface, about twice the size of a dollar, on the outside of the thigh, and applied to it half a grain of acetate of morphia. Failing to give relief, in fifteen minutes a second like application was made on the inner side of the knee, and a third succeeded in entirely relieving the pain. A little drowsiness and vertigo followed, which soon disappeared.

The second was a case of acute rheumatism, in which two applications like the above were made to the thigh. The pain, which was excruciating, was permanently relieved, although in other respects the disease pursued its regular course.

SUBCARBONATE OF IRON IN CHRONIC RHEUMATISM.

DR. BELCOMBE has given notice to the profession, in the *English Journals*, that he has for the last five years been in the habit of treating Chronic Rheumatism with Carbonate of Iron, and generally with good success. This he supposes may be attributed to the alliance of this disease with Neuralgia. Dr. Scudamore makes mention of this medicine, but gives no remark respecting its use. With this exception, it is a remedy new, we believe, with Dr. Belcombe.

DROPSY.

DR. BRIGHT, in his medical reports recently published in London, advances the opinion, that a considerable proportion of the cases of dropsy which are met with in practice, have their origin in organic derangement of the kidneys. This idea is con-

firmed by Dr. Christison, of Edinburgh, who has found the kidneys diseased in all the cases of death from dropsy which he has had opportunity to examine. Four cases of this kind, with the appearances on inspection, are given in a late No. of the Med. and Surg. Journal.

The structural changes discovered in these cases, differed considerably from each other, but in all they were amply sufficient to prove the existence during life of decided renal disease. Analysis of the urine, in all these cases, proved the urea to be deficient in quantity.

BOSTON, TUESDAY, NOVEMBER 17, 1829.

RETENTION OF A FŒTUS IN UTERO.

WE published, the week before last, a letter extracted from the London Medical Gazette, which contained the history of a case in which parturition took place *thirteen* calendar months after the period of conception. The author of that letter, Mr. CULLEN, a Surgeon in England, says that in the course of a long practice, he had neither seen nor heard of any similar case, nor had he met with any such in the course of his reading. This fact ought perhaps to call our attention more particularly to the history of a like phenomenon, communicated to the Editor of this Journal by Dr. Homans, and published in the present volume, page 372. Such cases are important not only in a physiological and pathological point of view, but also, and more particularly, as connected with juridical medicine.

LECTURES IN BOSTON.

FEW forms of instruction are more inviting than public lectures. This sentiment is very generally entertained, we should judge, at the present day, since their number and va-

riety is annually increasing. The present season there are in progress in this city, courses of lectures on Anatomy and Surgery, on Midwifery and Medical Jurisprudence, on Materia Medica, on the Theory and Practice of Physic, and on Chemistry, at the Medical College. Full courses are also given on a variety of subjects of Science connected with the Arts, to the Members of the Mechanic Institute; others to the Society for the Diffusion of Useful Knowledge, and still others to the Mechanic Charitable Association. Besides, a course on Chemistry and Mineralogy is advertised by Dr. Webster,—on Entomology by Dr. Storer, and on Chemistry and Pharmacy by Dr. Gay. Book-keeping and other arts are also taught in this agreeable method; and the lectures generally are accessible for so small a fee, as to offer facilities for the acquisition of knowledge never before enjoyed in this place.

Solution of Camphor.—Dr. H. N. Preston, of Newton, recommends, in the last No. of the "Genius of Temperance," that a solution of Camphor in Lime-water be used in

families, instead of the common Spirits. His mode of dissolving this gum, is to pour six ounces of lime-water on two drachms of camphor, previously rubbed down with an equal weight of quick lime. After allowing it half an hour to settle, the clean solution to be decanted.

The Doctor is of opinion that the lime can in no case where camphor is used in families, interfere with its desired operation; and the advantages of this preparation over the spirituous are, that when mixed with water, the gum will not separate; it is more economical; and, most of all, it is one important step toward the desirable banishment of alcohol from medicinal preparations.—These are certainly very important objects; but we are not aware why the common Emulsion or Mixture of Camphor, which has long been in use and kept by all apothecaries, does not answer to the full all the purposes contemplated by this new preparation. The sweet almonds and sugar which enter into its composition, make it more palatable than the lime-water solution; and we should always be slow to adopt any new medicine in place of one which is well known and in common use, when the former offers no superior advantage. Physicians might well prescribe the Emulsion, in many cases where they are in the habit of directing the alcoholic solution.

Extraordinary Success.—A French writer recommends in high terms the oil of turpentine for the cure of lumbago and sciatica; and seriously gives, as proof of its value in these diseases, the remarkable fact, that

“out of seventy-one cases, he greatly relieved fifteen by its external and internal use.” Nothing surely will so soon or thoroughly deprive a man of his senses, as a hobby.

Case of Uncommon Growth.—This case is recorded by Dr. Bedor, in *La Clinique*. It occurred in a young man who had symptoms denoting organic disease of the heart, and who, in twenty-five days, increased in stature three inches. The patient died suddenly, a few days after he was seen by Dr. Bedor. He was scarcely nineteen years of age, and had attained the unusual growth of six feet three inches.

Fœtus affected with Fungous Hæmatodes.—Dr. Tonnele delivered a woman of a child, which had upon its right parietal bone an enormous fungous hæmatodes. The base of this tumor originated in the osseous tissue, and perforated it like a sieve; the dura mater was healthy.—*Journal des Progres.*

Bill of Mortality.—It will be noticed by our Bill of Mortality, that the number of deaths in the week has been but 10. This fact has been pretty extensively circulated in the newspapers. It appears, however, to be wholly incidental, since the number the week previous was 32,—very considerably more than the usual average.

NOTICE. Our subscribers are informed that Mr. BARNET PETERS, of Portland, is no longer Agent for the Medical and Surgical Journal.

WEEKLY REPORT OF DEATHS IN BOSTON, ENDING NOVEMBER 4.

Date.	Sex.	Age.	Disease.	Date.	Sex.	Age.	Disease.
Oct. 30.	M.	12mo	scrofula		M.	84 yrs	delirium tremens
Nov. 1.	M.	2 yrs	croup		M.	62	suicide
	F.	5	hooping cough		F.	84	old age
	F.	3	measles	3.	M.	48	consumption
	F.	14 mo	mortification in the bowels	4.	F.	4 mo	canker
Males, 5—Females, 5.				Total, 10.			

ADVERTISEMENTS.

ANATOMICO-SURGICAL DRAWINGS, and Descriptions of all the Surgical Operations, according to the most approved methods. By L. J. VON BRERKOWSKY. Translated from the German. In two volumes, and 570 drawings on 58 folio plates.

EXTRACTS FROM THE PROSPECTUS.

"Encouraged by the approbation of the Medical Profession, it is proposed to publish a work under the present title."

"This work contains 570 drawings, on 58 plates folio; to which is annexed, in two volumes 8vo. a concise explanation of each surgical operation. The plates exhibit not only the parts interested in operations, in their natural position and size, but, what is much more important, represent the different acts or stages of the whole operation, while others exhibit delineations of such morbid affections as consist in the change of the natural position, structure, color, &c. In order to afford the work at a moderate price, the plates will be Lithographic; and for the purpose of securing perfect accuracy, engagements have been entered into for their preparation in Berlin, under the especial direction of two of the most distinguished Professors of the University of that city."

A specimen of the translation, and the plates, is deposited for inspection at the Bookstore of CARTER & HENDEE, who receive subscriptions for the work.

Subscribers will be furnished with the work, and the first impressions of the plates, at the price of \$30.

The subscription list will be open until the 1st of November, 1829, after which period the price of the work will be raised to \$40.

P. S. For the accommodation of subscribers the work will be issued in five Numbers, at \$6 each, payable on delivery. Sept. 29. 18202N1D.

CONSOLIDATED COPAIVA.

"COPAIVA may be given in this form without the least inconvenience. Neither communicating taste, nor imparting odor to the breath, it is also retained without the least disquietude or uneasiness to the stomach; and I am informed by Dr. Rousseau, that in large doses it does not purge."—*Phil. Journal of Med. Sciences.*

See an article in this Journal, Aug. 18th.

EUROPEAN LEECHES.

An excellent lot of European Leeches, which will be sold at a reasonable price, or applied, in any part of Boston or in the vicinity.

For sale by NATHAN JARVIS, 188 Washington Street, where Physicians will find medicines at as reasonable terms as at any place in Boston.

Aug. 25.

oeptf.

CARTER & HENDEE have just published,—The Constitution of Man, considered in Relation to External Objects. By GEORGE COMBE.

From the Preface to the American edition.

"Mr. Combe's work should be placed with those, of which so many within a few years have appeared, which are devoted to the all-absorbing topic of Education. It treats of moral, intellectual, and physical education. This is not formally done under so many distinct heads. But the whole course of reasoning of the author, and the whole array of all his illustrations, have it always obviously in view to show how the highest cultivation of each of these may be most surely brought about.

"The publishers have printed this edition from a belief that there is much in the work to interest the community."

"It has a novelty to reward the general inquirer, and it presents the well known under novel aspects. There is one class amongst us who may study it with much advantage. Scholars are referred to, a class here too small to form a distinct order with habits of their own, and who insensibly fall into those which, although not mischievous, to the multitude on the score of health, too often make ill health the portion of the sedentary student, and bring upon him premature decay.—To all classes it is recommended, and the various learning and acuteness of the author well fit him to write a book which addresses its instructions to the whole community." Sept. 8.

A TREATISE on the Scrofulous Disease, by C. G. HUFELAND, Physician to the King of Prussia, &c., translated from the French of M. Bousquet, by Charles D. Meigs, M.D., is just received and for sale by CARTER & HENDEE.

Sept. 8.

Published weekly, by JOHN CORROW, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

VOL. II.]

TUESDAY, NOVEMBER 24, 1820.

[No. 41.]

I.

BIOGRAPHICAL SKETCH OF JOHN HUNTER.

THE celebrated John Hunter, one of the greatest anatomists that ever lived, scarcely received any education whatever until he was twenty years old. He was born in the year 1728, in Lanarkshire; and being the youngest of a family of ten, and the child of his father's old age, would seem to have been brought up with the most foolish and unfortunate indulgence. When he was only ten years old his father died; and under the charge of his mother it is probable that he was left to act as he chose, with still less restraint than ever. Such was his aversion at this time to anything like regular application, that it was with no small difficulty, we are told, he had been taught even the elements of reading and writing; while an attempt that was made to give him some knowledge of Latin (according to the plan of education then almost universally followed in regard to the sons of even the smallest landed proprietors in Scotland), was, after a short space, abandoned altogether. Thus he grew up, spending his time merely in country amusements, and for many years without even thinking, as it would appear, of any profession by which he might earn a livelihood. It was, however, found necessary at last, that

something should be determined upon in regard to this point; for the family estate, such as it was, had gone to his eldest brother, and the father had made no provision for maintaining John any longer in idleness. So, destitute as he was of all literary acquirements, there was no other resource for him except some business that would give employment to his hands rather than his head; and one of his sisters having married a cabinet-maker, or carpenter, in Glasgow, it was resolved he should be bound apprentice to his brother-in-law. With this person, accordingly, he continued for some time, learning to make chairs and tables; and this probably might have been, for life, the employment of the genius that afterwards distinguished itself so greatly in one of the most important walks of philosophic discovery, but for circumstances which, at the time when they occurred, were doubtless deemed unfortunate. His master failed, and John was left without any obvious means of pursuing even the humble line of life on which he had set out. He was at this time in the twentieth year of his age. His elder brother, William, afterwards the celebrated Dr. Hunter, had very recently settled as a medical practitioner in London; but had already begun to distinguish himself as a lecturer and anatomical demonstrator. To him John determined to address

himself. The rumor of the one brother's success and growing reputation had probably, even before this time, awakened something of ambition in the other, with a wish to escape from the obscure fortune to which he seemed destined. John now wrote to his brother, offering him his services as an assistant in his dissecting-room, and intimating that if this proposal should not be accepted, he meant to enlist in the army. Fortunately for science, his letter was answered in the way he wished. On his brother's invitation, he set out for the metropolis. He was now put to work in the manner in which he had requested to be employed. His brother, we are informed by Sir Everard Home, his first and best biographer, gave him an arm to dissect, so as to display the muscles, with directions how it should be done; and the performance of the pupil, even in this his commencing essay, greatly exceeded the expectations of his instructor. The doctor then put into his hands another arm, in which all the arteries were injected, and these, as well as the muscles, were to be exposed and preserved. So satisfied was Dr. Hunter with his brother's performance of this task, that he assured him he would in time become an excellent anatomist, and would not want employment. Perhaps, although we do not find it so stated by any of his biographers, he may have felt an advantage, in making these preparations, in the habits of manual dexterity acquired during his apprenticeship to his first business.

So rapid, at all events, was the progress which he made in the study of anatomy, that he had not been a year in London when he was considered by his brother as quali-

fied to teach others, and was attended accordingly by a class of his own. His talents, and the patronage of his brother, brought him now every day more and more into notice. It does not belong to our purpose to trace the progress of his success after this point. We may merely remark, that long before his death he had placed himself, by universal acknowledgment, at the head of living anatomists; and was regarded, indeed, as having done more for surgery and physiology than any other investigator of these branches of science that had ever existed.

The important discoveries, and peculiar and most original views, by which John Hunter succeeded in throwing so much new light upon the subject of the functions of animal life, were derived, as is well known, principally from the extraordinary zeal, patience and ingenuity, with which he pursued the study of comparative anatomy, or the examination of the structure of the inferior animals as compared with that of man. To this study he devoted his time, his labor, and it may be said his fortune; for nearly every shilling that he could save from his professional gains was expended in collecting those foreign animals, and other rare specimens, by means of which he prosecuted his inquiries. When his income was yet far from being a large one, he purchased a piece of ground at Earls' Court, in the village of Brompton, and built a house on it to serve as a place of deposit for his collections. The space around it was laid out as a zoological garden for such of his strange animals as he kept alive. Even when most extensively engaged in practice, he used to spend every morning, from sun-rise till

eight o'clock, in his museum. Yet, in addition to his private practice, and a very long course of lectures which he delivered every winter, he had for many years to perform the laborious duties of Surgeon to St. George's Hospital, and deputy-surgeon-general to the army,—superintending at this time, also, a school of practical anatomy at his own house. Still he found leisure, in the midst of all these avocations, not only for his experiments upon the animal economy, but for the composition of various works of importance, and for taking an active part both in the deliberations of the Royal Society, of which he had been early elected a Fellow, and in other schemes for the promotion and diffusion of natural knowledge. He was the originator, in particular, of the *Lyceum Medicum Londinense*,—a medical society comprising many eminent individuals, which met at his lecture-rooms, and rose to great reputation. That he might have time for these multiplied objects of attention, he used to allow himself to sleep only four hours at night, and an hour after dinner.

In order to procure subjects for his researches in comparative anatomy, his practice was to apply to the keeper of the wild beasts in the Tower, and the proprietors of the other menageries in town, for the bodies of such of their animals as died, in consideration of which he used to give them other rare animals to exhibit, on condition of also receiving their remains at death. His friends and former pupils, too, were wont to send him, from every part of the world, subjects for his favorite investigations. "In this retreat (at Brompton), he had collected," says Sir Eve-

rard Home, "many kinds of animals and birds; and it was to him a favorite amusement, in his walks, to attend to their actions and their habits, and to make them familiar with him. The fiercer animals were those to which he was most partial, and he had several of the bull kind from different parts of the world. Among these was a beautiful small bull he had received from the Queen, with which he used to wrestle in play, and entertain himself with its exertions in its own defence. In one of these conflicts, the bull overpowered him and got him down; and had not one of the servants accidentally come by, and frightened the animal away, this frolic would probably have cost him his life." On another occasion, "two leopards," says the same biographer, "that were kept chained in an out-house, had broken from their confinement, and got into the yard among some dogs, which they immediately attacked. The howling this produced, alarmed the whole neighborhood. Mr. Hunter ran into the yard to see what was the matter, and found one of them getting up the wall to make his escape, the other surrounded by the dogs. He immediately laid hold of them both, and carried them back to their den; but as soon as they were secured, and he had time to reflect upon the risk of his own situation, he was so much affected that he was in danger of fainting."

Mr. Hunter died in the sixty-sixth year of his age, in 1793. After his death, his museum was purchased by parliament for the sum of fifteen thousand pounds; and it is now deposited in the hall belonging to the Royal College of Surgeons, in Lincoln's-Inn-Fields. It is understood to contain about

twenty thousand anatomical preparations, which are arranged so as (in the language of Sir Everard Home) "to expose to view the gradations of nature, from the most simple state in which life is found to exist, up to the most perfect and most complex of the animal creation,—man himself." The extreme beauty of these preparations is striking even to an unlearned eye; and their scientific value is such as to render the collection one of the most precious of the kind in the world. It is certainly one of the most splendid monuments of labor, skill and munificence, ever raised by an individual.

It is important to remark that, with all his powers, this wonderful man never entirely overcame the disadvantages entailed upon him by the neglect in which he had been allowed to spend his early years. He used to dwell, we are told, on the advantage which is gained in regard to clearness of conception, by the committing of one's ideas to writing, comparing the process to the taking of stock by a tradesman, without which he cannot know with certainty either what he has or what he wants. Yet he himself continued to the end of his life an awkward, though by no means an unpractised writer. After coming to London, he entered himself at St. Mary's Hall, Oxford, probably with the view of being able to maintain at least some pretension to scholarship, but it does not appear that he carried his assumption much farther. He attained little acquaintance with the literature even of his own profession; and it not unfrequently happened indeed, we are told, that upon communicating a supposed disco-

very of his own to some one of his more erudite friends, he had to suffer the disappointment of learning that the same thing had been already found out by some other well-known anatomist. But he felt his literary deficiencies chiefly as a lecturer, the capacity in which his more regularly educated brother excelled. It is asserted by Dr. Adams, who has written a life of John Hunter, that he always used to swallow thirty drops of laudanum before going to lecture. If these were heavy penalties, however, which he had to pay for what was not so much his fault as that of others, the eminence to which he attained in spite of them, is only the more demonstrative of his extraordinary natural powers, and his determined perseverance.—*Library of Entertaining Knowledge.*

II.

REMARKS ON THE USE OF SPIRIT OF TURPENTINE IN INCARCERATED HERNIA.

By C. B. HAMILTON, late Surgeon of the Marine Hospital at Washington City.

IN the last number of this Journal, I have noticed a paper, by Professor Sewall, on the use of spirit of turpentine internally, as a remedy in incarcerated hernia. In his concluding paragraph the Professor observes, "It requires the experience derived from many cases, to entitle a new remedy to confidence;" and it may be added that a proper application of a remedy to those diseased conditions of the system, in which, from analogy and reason confirmed by experience, it is found to prove beneficial, is equally necessary to sustain that confidence when it is acquired.

I have for many years used the spirit of turpentine in incarcerated hernia, without being aware that it was a new remedy, and without its being in every instance successful; for in one case in which I employed it as a dernier resort, upon the patient's positively refusing to submit to an operation, no mitigation of the disease, but rather an aggravation of suffering, resulted from its exhibition. This was a case of omental inguinal hernia, and the patient died with all the symptoms of supervening mortification. That the hernial sac contained a portion of omentum only, I inferred from the bowels yielding to the operation of purgative medicine, which could not have been the case had a portion of the intestinal tube been shut up by the stricture: the stricture in this case was in the tendon forming the ring, and therefore beyond the immediate influence of a remedy applied to the stomach. Among the earlier recollections of my boyhood, is the use of the spirit of turpentine in spasmodic or flatulent colic; and a case that came under my observation when about ten years of age, served to fix its use in this disease indelibly on my memory. This was a case in which an uterine inflammation succeeding to concealed abortion, in the person of a servant girl, was mistaken by her mistress for colic, and the turpentine administered with the most melancholy effect.

Being called to a case, some years ago, of strangulated scrotal hernia, of but a few hours standing, which, from the great distension of the strangulated bowel by flatus and excrement, resisted all my efforts at reduction by taxis, I was naturally led to spe-

culate upon the cause of so great and sudden an accumulation in the gut. It struck me that if the occluding stricture existed in the abdominal ring, it must necessarily act alike upon the descending and ascending portions of the intestine, and that of course nothing could be derived to the incarcerated portion from that within the abdomen, to give it the volume it possessed. It therefore occurred to me that the descending portion of the tube was free, and that the distension was caused by a stricture taking place in the muscular fibres of the ascending portion, and arresting the passage of the contents of the bowels brought down by the peristaltic motion. Considering this state of things to differ in no particular from that which takes place in spasmodic colic, I at once resolved to make trial of the turpentine, the good effects of which I had so often witnessed in the latter disease, and it succeeded beyond my most sanguine anticipations. In a few moments the contents of the strangulated bowel were spontaneously removed, and the intestine restored to the abdominal cavity by taxis, with perfect ease.

About twelve months since, I was called to a colored man, the property of John Addison, Esq., of this district. On my arrival, I was informed by his master that he had been for many years afflicted with scrotal hernia; that he had been in the habit of reducing it himself; that a few hours before he had been seized with severe pain in the part, and that the rupture now resisted his usual efforts to reduce it. On examining the patient, I found the scrotum so enormously enlarged that no trace of a penis could be seen;

the integuments were cold to the touch, and the swelling elastic. The patient informed me that a short time before the attack of pain, he had eaten a quantity of unripe fruit, and ascribed his situation to that cause. Without making any attempt at reduction, I inquired if there was any spirit of turpentine in the house; and fortunately about the half of a common-sized wineglassful was produced, which I immediately administered. The relief was instantaneous; the spasm was removed; the air and fæces, by the elastic pressure of the intestine, was carried upwards with a gurgling sound into its continuous portion within the abdomen, and in five minutes after, the patient with his own hand reduced the rupture.

I have made these remarks for the purpose of directing the attention of practitioners to what I consider to be the only condition of the parts (which, by the way, might, I conceive, be properly termed a scrotal colic) in which the turpentine proves an invaluable remedy, and to express my opinion of the impropriety of administering it in those cases where the obstruction arises from a stricture of the tendon forming the abdominal ring, or from chronic enlargement of the incarcerated viscera.—*Amer. Journal of the Medical Sciences.*

III.

REMARKS ON THE EXCISION OF CARTILAGINO-BONY SUBSTANCES FROM THE KNEE JOINT, WITH A CASE.

By SAMUEL C. BRADBURY, M.D., of Bangor, Penobscot county, Maine.

In his observations on the excision of cartilaginous substances from

the knee joint, after speaking of "the perilous symptoms sometimes following wounds of the knee joint," Mr. Samuel Cooper says, "Small as the chance is of losing the limb, and even life, in the attempt to get rid of the disease, since the inconveniences of the complaint are in most cases very bearable, and are even capable of palliation by means of a bandage, endangering the limb and life in any degree must seem to many persons contrary to the dictates of prudence." But the same surgeon says further, "If a man be deprived of his livelihood, by not being able to use his knee; if he cannot or will not take the trouble of wearing a bandage; if he be urgently desirous of running the risk of the operation, after things have been impartially explained to him; if a bandage should not be productive of sufficient relief; and lastly, if *excessive pain, severe inflammation of the joint, a great deal of symptomatic fever, and lameness, should frequently be produced by the complaint, I think it is the duty of the surgeon to operate.*"

Now it appears to me, these are the very circumstances under which the operation would most likely be followed by perilous symptoms. That cutting into a joint already much inflamed,* or, if I may use the expression, in a state tending to inflammation, with high symptomatic fever, and perhaps in a highly irritable or

* It appears to us that our correspondent has misapprehended Mr. Cooper, in supposing that he recommends the operation during the existence of inflammation in the joint; and we might adduce, in evidence of this, several observations from the same article in his Surgical Dictionary, quoted in the preceding paragraph.—*Ed.*

even tainted constitution, should be followed by still greater inflammation and danger, is what every surgeon might expect; and if the operation in question has sometimes "been followed by a violent inflammation, fever, and death itself," I think it may have been because it was performed on an improper subject, or at an improper time, or in consequence of improper treatment afterwards. It would seem that the most favorable circumstances for the operation, are a sound healthy constitution, and entire abstinence at the time of inflammation in the joint; and in this state of things, while the patient remains in a pure and healthy atmosphere, however dangerous or fatal the operation may have proved under opposite circumstances, or in crowded and tainted hospitals, I cannot believe the operation so hazardous as Mr. Cooper and others would have us believe; and I trust experience will prove that excision is the only sure and comparatively safe mode of relief, in cases such as the one I am about to describe. By delay, in tampering with knee-caps and bandages, in such cases, we every day endanger the production of the state of things above described by Mr. Cooper; a state at least as dangerous to the limb and life, as the operation, performed at a proper time on a suitable subject, can be; and a state which may forever preclude the reasonable hope of relief by the operation.

CASE.—Oliver Brooks, of Newport, a farmer, aged twenty-five, of robust constitution, consulted me on the 14th of July last, with two preternatural bodies in the

joint of the left knee. They were easily moved in different directions about the joint, and from one side of the patella to the other. The complaint was brought on about two years before by a severe strain, which laid him up for several weeks. At the time of consulting me, there was no inflammation or lameness of the joint, except when, in exercising the limb, these extraneous bodies came in certain positions of the joint. This he said would always happen on attempting to walk any considerable distance, and sometimes throw him down, as he expressed it, as suddenly as though he had been shot; causing severe pain and fainting at the time, and a degree of inflammation in the joint, which would occasionally confine him from his labor for several days.

I advised an operation, which was consented to, and which was performed in the following manner:—

The patient, sitting in the chair, with the limb extended and the heel on the floor, brought both the substances together, at the outer side of the articulation near the superior attachment of the capsular ligament, and assisted in confining them. Drawing the integuments a little towards the patella, I divided them, in a longitudinal direction, to the extent of an inch and a half, and then carefully made an incision through the capsular ligament, over the extraneous bodies, of a sufficient size for their exit. The wound was then accurately closed by adhesive plaster, compresses, and the uniting bandage. In two hours after the operation, a very severe pain came on in the knee joint, shooting up to the hip, which was

only relieved by large and repeated doses of laudanum and ether. In two or three hours more the pain entirely subsided, and never in any degree returned. The patient was kept in a horizontal position, with the limb constantly extended, for the first forty-eight hours. A strictly antiphlogistic regimen was enjoined, and as he had undergone no previous preparation, on the second day free evacuations from the bowels were procured by Epsom salt. No inflammation or fever followed the operation, the appetite remaining unimpaired, and sleep uninterrupted. On the third day, contrary to express directions, the patient walked on the limb for some distance, and in one week from the time of the operation resumed his usual labors, the joint being kept supported for some weeks with a large plaster of simple diachylon. The wound was but partially healed by the first intention; but soon healed entirely, and has since been perfectly well.

In this case the place of the incision was chosen, because the substances were not so easily brought together, or retained in any other position. The largest of these bodies was of a triangular shape, its longest side seven-eighths of an inch, and three or four lines in thickness; the outside cartilaginous and convex, the inside flat and bony.—*Ib.*

IV.

NECROSIS OF HALF THE LOWER JAW.

Extraction of the Sequestrum by M. Dupuytren.

THE phenomena of an incarcerated sequestrum does not belong

exclusively to the long bones.—A woman, 30 years of age, pale, fat, and eminently *lymphatic*, had experienced, during the last two years, slight and transient pains in the left side of the jaw, when about eight months ago these increased so much as to disturb her sleep. The teeth, which till then had been white, assumed a greyish color, and the breath became foetid. After a month of acute suffering, a fistula took place at the symphysis, within the base of the jaw; others soon showed themselves at various points nearer the angle, but always within the lower margin of the bone, and on the left side. One only formed to the right, about half an inch from the symphysis. The suppuration also burst into the interior of the mouth. The patient asserted that the pus only oozed from the gums; but the sequel proved that there was a true fistula internally. When she used a gargle, some of it always escaped by one of the four fistulae. It was six months since the mastication had become painful and almost impossible, and since the molares of the affected side became loose. At this time, also, the soft parts which cover the anterior maxillary foramen almost entirely lost their sensibility, which could only have arisen from the destruction of the nerve. Tonic remedies were employed without avail: the pains continued to increase in severity, and the suppuration to augment in quantity. The disease was recognised by M. Dubois, but he having found the sequestrum to be immoveable, advised the woman "to have patience."

She came to the Hotel Dieu the beginning of August, at which

time it was difficult to recognise the dimensions of the new bone amid the swelling of the soft parts; but it was ascertained to be very solid, and to inclose the old bone in its cavity. A probe introduced at one of the fistulæ, gave the idea of a moveable body, and even caused a noise, which was audible at a certain distance.

On the 17th of August, the following operation was performed :—The patient's head being fixed by an assistant, M. Dupuytren laid the two posterior fistulæ into one, by an incision about an inch long; then cutting deeper, he opened, at its lower part, the bony cavity which contained the sequestrum. By means of the common pincers, he removed, not without some effort, a plate of bone, two inches long and one in breadth, and a line and a half thick. The forefinger introduced to the bottom of the wound, discovered another portion of bone, moveable and denuded, situated at the back part. The pincers were again applied, and extracted a triangular fragment, which proved to be the angle of the jaw. The finger of the operator traversed freely every part of the cavity, and felt the naked roots of the teeth;—those of the molares were loose, and M. Dupuytren debated with himself, whether, under such circumstances, they could live. The transplanting of teeth has so frequently succeeded, that it appears probable that in this case they will not perish, but recover their solidity by an approximation of the bone, from which they are now some lines distant. A *meche* was introduced into the wound, and the dressing completed with dry charpie.

From this time the matter only passed by the wound,—the mouth was no longer infested with it. A large opening existed between the cavity of the mouth and that of the new bone, and between this last and the exterior. This communication existed before; but the absence of the sequestrum now rendered it more pervious, so that the gargle readily escaped by the wound. After a few days the wound was not filled with the charpie, and it began to contract. The bony pouch contracted every day, if we may judge from the teeth becoming fixed, and from the quantity of fluid which passed from within outwards diminishing. The pain left her entirely.

Sept. 4th.—All the molares are now as fast as those of the opposite side.

6th.—M. Dupuytren has discovered, by means of a probe, that the other half of the jaw is also dead. He intends to operate on it when the sequestrum becomes mobile.—*Lancette Francaise*.

V.

A CASE OF EPILEPSY SUSPENDED BY A BURN ON THE SOLE OF THE FOOT.

Communicated for the Western Journal of the Medical and Physical Sciences, by Dr. H. E. GREEN, of Greensburgh, Ky.

ON the 5th of October, 1827, I was applied to for advice in a case of violent epileptic fits. The subject was a colored man and a slave, about 48 years old, and of steady habits. It was about three months since the first attack; but he had complained, for twelve or eighteen months previously, of tension, uneasiness and pain about

the umbilical region. He had all this time done the work of a common laborer. The convulsions came on, without any previous notice, at each full and change of the moon, and he would have from four to ten at each attack. When I first saw him, he was moderately corpulent, and looked healthy; he said, however, that he was in a very costive habit, and frequently went two or three days without an evacuation.

I bled him, and ordered it to be repeated every ten or twelve days for two months; inserted a large issue in the nape of his neck; directed the daily use of pills composed of aloes, ipecacuanha, and the blue mercurial mass, and prescribed a simple diet. This course was continued for three months, without any sensible variation in the disease. He then took three grains of the nitrate of silver daily, for two months, with no better success. He now fell into the hands of a *patent steam doctor*, by whose engine he was nearly destroyed.

At length all hope of relief was despaired of, when in the month of January, 1829, in a severe fit, alone, he fell into the fire and *burnt severely the whole of the bottom of the left foot. It did not get well for about four months, during the whole of which time he had no fits, but exhibited every indication of returning health and vigor. As soon, however, as it was healed, the fits returned.*

Profiting by the hint afforded by this accident, I have put an issue into each ankle, the effect of which remains to be ascertained.

VI.

AN ACCOUNT OF A SINGULAR CASE OF FETAL MONSTROSITY.

By Dr. JOHN COOK BENNET, of McConnellsville, Ohio.

WHEN residing in Circleville, the following extraordinary case fell under my observation:—

A lady, in the sixth week of utero-gestation, was frightened in the street by the fighting of two dogs, one of which was mad. This was in the month of April. Immediately after the event, she was seized with uterine hemorrhage, which continued for twenty-four hours, and the same discharge returned, in a less degree, once a fortnight, till she suffered abortion in June. On the 30th of May, she was seized with a violent inflammation in the left eye, which returned for three successive days, and after an ineffectual resort to cupping and blistering, was cured by the loss of a quart of blood from the arm. On the 4th of June, the uterine hemorrhage returned. On the 5th, I was requested to visit her, and found that abortion was likely to take place, as tolerably strong uterine pains recurred every few minutes. I gave opium and laudanum freely, but the contractions of the uterus increased in violence; and in the evening, the liquor amnii was discharged. In half an hour after this occurrence, or about 8 o'clock, the arm of a foetus presented, and soon afterwards delivery took place. The child was perfect, and weighed 3½ ounces. The placenta was thrown off about 11 o'clock, and weighed half an ounce more than the foetus.

At 7 o'clock next morning, another placenta was discharged, weighing 5 1-2 ounces, and brought

with it, attached by an umbilical cord, a monster, of rather less than its own weight, resembling the body and head of a puppy. It was destitute of extremities and sexual organs, but had an anus and meatus urinarius. Its head was composed of brains only, and in its outline was essentially canine. It had neither eyes, ears, nor mouth, but was marked with lines and spots indicating the situation of those organs. It was not subjected to dissection.

At 4 o'clock, on the same day, another monster, with its placenta, was thrown off. It weighed 6 1-2 ounces, and the placenta 6. It resembled the first in all respects, except that there was attached to its back a mass resembling liver, which extended, widening and thickening, from the neck to the sacrum. When detached, it weigh-

ed one ounce, which was also the weight of the head. I was permitted to make a hasty examination of the thoracic and abdominal organs of this monster; and found them all natural, except perhaps that the liver was larger than is common in a foetus of such a size. It weighed two ounces. I could not obtain permission to preserve either of the monsters, or scarcely to examine them, so unpleasantly were the feelings of the patient and attendants affected by the phenomenon.

The patient before delivery appeared like one in the sixth month of gestation. Her recovery was rapid.

I am aware that the account which I have given will be read with incredulity, but am prepared to substantiate all that it contains. *Western Journal.*"

SKETCHES OF PERIODICAL LITERATURE.

OPHTHALMIA NEONATORUM.

UNDER this title, Mr. Wishart, of Edinburgh, has published an able article on the purulent ophthalmia of infants, of which we shall endeavor to present our readers a brief analysis.

The disease usually commences in from three days to four weeks after birth. The eyelids are first observed to be frequently glued together, so that the child has considerable difficulty in separating them, as is evident from the action of the muscles in opening the eyes. They are however generally open in a moderate light, and still more so if the room is darkened. On farther examination, the conjunctiva of the

ball is found clear, but that of the lids is observed to be red, puckered, and covered with a white, mild, thick slime. The difficulty of opening the lids, the intolerance of light, the swelling and redness of the conjunctiva, gradually increase as the disease advances. At length the lids remain constantly shut, and any attempt to separate them occasions great pain to the patient. This can only be effected during sleep, by moistening their edges with lukewarm water. On making the separation, a copious discharge takes place of thick mucus, varying in color from white to a greenish yellow, and often mixed with streaks of blood. The quantity of this is in proportion to the vio-

lence of the inflammation, and the length of time that the lids have been allowed to remain undisturbed. Still, however, the redness is confined to the conjunctiva of the lid, or if the ball is inflamed, the injected vessels are not so numerous but that they appear perfectly distinct.

At this period, an attempt to open the eye is not unfrequently followed by eversion of the lid. This eversion must be carefully replaced; otherwise the lining membrane thus exposed to the air becomes more red and swollen, and acquires the appearance and character of inverted *rectum*. It will sometimes happen that the lid cannot be reduced, and the eversion is permanent. This state of things is usually followed by the gradual failure of the patient.

An occurrence not uncommon at this stage of the disease, is a greater or less hemorrhage from the lids. This, though alarming, is a favorable occurrence; for by this bleeding turgid vessels are emptied, and the inflammation diminished. If, however, the progress of the disease is not checked, the symptoms which ensue are more formidable. In consequence of the swelling of the lids, the edges of the tarsus are contracted, and the matter secreted can no longer escape. Rendered acrid by confinement, it increases the inflammation of the eyeball, an ulcer forms on the cornea, which becomes gradually deeper till the membrane is perforated, and the consequences which ensue terminate only with the entire destruction of the organ.

Among the causes of this disease, the more obvious are those which

produce other complaints among the poorer classes,—namely, exposure to cold or dampness, or to a strong light, as in too suddenly admitting the glare of sunshine, or in dressing the child before a large fire. A much more frequent cause, however, than is generally suspected, is the existence of morbid uterine discharge, whether venereal or otherwise, in the parent at the period of delivery. More than two-thirds of the infants affected, are born of mothers laboring under leucorrhœa.

The complaint, when treated in the best way, seldom continues less than three weeks, and if neglected or unskillfully managed, may be protracted to ten or twelve. The morbid changes most frequently left by it, are the ectropium or eversion already mentioned, and opacity of a portion of the cornea. Neither of these occur except in the worst cases, and are for the most part owing to injudicious treatment.

With regard to the prevention of this complaint, two precautionary measures are suggested by the considerations already mentioned,—one, to remove if possible any morbid discharge existing in the parent previous to delivery, and the other, to wash the eyes of the infant carefully immediately after birth.

The disease, as already stated, seems to have a certain regular course, and a violent or sudden interruption of its progress would be dangerous to the patient. The following mode of treatment, however, is safe and effectual. If the case is seen within a week from its commencement, which is as soon as ge-

nerally happens, the purulent discharge is to be carefully washed away with warm water, and the following lotion ordered :—

R. Sulph. Zinci $\mathfrak{D}\text{i}$.
Aquefont $\mathfrak{Z}\text{x}$. Solve et adde
Liq. Subac. Pl. $\mathfrak{Z}\text{i}$.
Tinct. Camph. $\mathfrak{Z}\text{i}$.— $\mathfrak{Z}\text{ij}$. M. et cola.

This is to be carefully injected three times in a day with a fine pointed ivory syringe ; at first diluted a little with hot water, so as to be rendered tepid, in which state it answers better, especially in cold weather. If the discharge be very great, the intervals of its application must be abridged. In the state above mentioned, it generally produces pain, which continues from five to ten minutes ; if the child cry longer than this, it ought to be diluted. In the mean time, the eyes are to be frequently washed with warm water, and at night a small quantity of the ung. ox. zin. is to be inserted between the lids. Leeches or scarification may be added to the treatment, if necessary.

At the end of two weeks, if the cure goes on well, the inflammation will have diminished, and the discharge will acquire a watery appearance. At this period, the ung. hyd. ox. rub. may be substituted for that above mentioned, and the lotion altered to the following :—

R. Mur. Hyd. gr. i.
Aq. Ros. $\mathfrak{Z}\text{vi}$. M. et adde
Vin. Op. $\mathfrak{Z}\text{iss}$. M. f. coll.

At the end of a month, it generally becomes unnecessary to use the syringe, and the collyrium may then be continued occasionally by dropping a portion on the inner angle of

the eye, and allowing it to pass over the surface.

The most usual sequelæ of purulent ophthalmia, as above mentioned, are opacity of the cornea and ectropium. The former complaint is removed in young infants without difficulty. The best treatment consists in the use of the ung. hyd. prec. at night, and the vin. opii, more or less diluted, in the morning. The eversion of the eyelid, when recent, is easily reduced, and rarely becomes permanent or irreducible, except in consequence of neglect. When it is so, however, the conjunctiva must be treated with the ung. hyd. prec., or some mild caustic, until the swelling is diminished, when an attempt must again be made to accomplish its reduction. The sooner this is effected, and the changed surface is withdrawn from the action of the air, the sooner will it return to its healthy state.

AMAUROSIS.

It has, we believe, been generally supposed, that the insensibility of the retina and optic nerves which constitute this disease, are always accompanied by want of irritability in the iris, and permanently dilated pupil. Dr. Robinson, of the Eye Dispensary in Edinburgh, has observed that these two circumstances have no necessary connection with each other. He has met with repeated instances in which the pupil was permanently dilated and immoveable, yet the vision not much impaired. On the other hand, cases of true amaurosis have occurred to him in which the

pupil was permanently contracted, while in others he found the iris as irritable as if vision had been perfect.

With regard to the remote causes of amaurosis, the disease is frequently hereditary, and is often observed to attack the successive generations of the same family at the same period of life. In persons predisposed to these attacks, they are very likely to recur from any cause which produces a determination of the blood to the head, and seem in these instances to be directly induced by pressure on the nerves of the organ. That the retina is very easily affected by slight changes in the circulation, there can be no doubt. Richter relates the

case of an individual who, when he held his breath and looked at a white wall, saw a kind of network, which appeared and vanished with the diastole and systole of the heart. The writer cites several cases in which amaurosis seemed evidently to depend on cerebral plethora, and in which general and local bloodletting were employed with a direct view to its removal, and with decided benefit. In one of these, the power of vision was to a great degree restored as soon as faintness was induced by the bleeding. As it appears that only part of Dr. R.'s cases are published, we hope to see this interesting point of pathology still further illustrated.

BOSTON, TUESDAY, NOVEMBER 24, 1829.

INFLUENCE OF THE AGE OF THE PARENTS ON THE SEX OF THEIR OFFSPRING.

THE interesting but mysterious subject of conception, and the laws, if any exist, which regulate the sex of the offspring, has received, of late years, an unusual share of the attention of the faculty. The following are the result of some researches on this subject, by Professor Hoffnacker, of Inspruck, published in the *Inspruck Med. Chir. Zeitung*.

1. In marriages where the mother is older than the father, the average number of male to that of female births is 90.6 : 100.

2. Both parents being of the same age, the proportion of boys to girls is 92 : 100.

3. The father being from three to six years older than the mother, the

number of male to that of female children is 103.4 : 100.

4. Where the father is from six to nine years older than the mother, the proportion is 124.7 boys to 100 girls.

5. The age of the father being from nine to twelve more than that of the mother, the proportion is 143.7 : 100.

6. Where the age of the father is eighteen years and more above that of the mother, the proportion of male to female births is 200 : 100.

7. Young men, from twenty-four to thirty-six, produce with young women, from fourteen to twenty-six, 116.6 boys to 100 girls.

8. If men between the age of twenty-four and thirty-six, are married to females between thirty-six and forty-six, the proportion of male to female children is 95.4 : 100.

9. Middle-aged men, from thirty-six to forty-eight years, being mar-

ried to young females, the proportion of their male and female children is 176.9 : 100.

10. Middle-aged men, and middle-aged women, produce 114.3 male to 100 female children.

11. Middle-aged men, being married to women of a more advanced age, the proportion of male to female children is 109.2 : 100.

12. Old men and middle-aged women produce 190 male to 100 female children.

13. If husband and wife are both equally advanced in years, the proportion of their male and female children is 164.3 : 100.

Mode of suspending the Secretion of Milk.—M. Ranque, chief physician to the Hotel Dieu of Orleans, employs with success, to diminish the sensibility of the mammary gland, upon which the secretion of milk depends, frictions morning and evening upon the breast, with the following liniment:—R. Laurel water ʒij.; sulphuric ether ʒi.; extract of belladonna ʒij. He prescribes at the same time rigid diet and sudorific drinks.

M. R., it is said, employs this liniment with success in engorgements of the testicles, after using antiphlogistics.—*Journal des Progrès.*

Vesicating Plaster.—Dr. Th. W. C. Martius recommends the following formula for this purpose. He says

it spreads easily, adheres well, and does not spoil.—R. Cantharid. contus. ʒiv.; inf. c. aq. ebull. ʒxx.; col. et evapor. leni igne ad syrupi consistentiam. Adde cer. flav. ʒiv.; resin pini ʒi.; ol. oliv., ol terebinth. aa ʒi.; alcohol vini ʒij. M. exact.

The strength of this plaster may be increased by using a larger proportion of cantharides.—*Bul. des Sc. Méd.*

Excision of enlarged Nymphæ.—

Dr. Wagner has performed this operation with success in a girl aged eighteen, in which the nymphæ were enlarged to an extraordinary degree.—*Bul. des Sc. Méd., May, 1829.*

Pseudo-caries.—The shafts of bones, and especially the tibia, in consequence of chronic inflammation, are frequently enlarged, thickened, and at the same time loosened in their texture, which comes to have nearly the same appearance as that of the spongy articulating extremities. In bones so altered a state resembling caries occasionally occurs. Mr. Syme says that he has hardly ever known this pseudo-caries resist the local application of blisters, and internal use of mercury.—*Edinburgh Med. and Surg. Journ.*

Lithotomy.—Of eighty-three operations by the lateral method, performed by M. J. M. Viricel, at the Hôtel Dieu of Lyons, eighty were successful.—*Revue Médicale.*

WEEKLY REPORT OF DEATHS IN BOSTON, ENDING NOVEMBER 14.

Date.	Sex.	Age.	Disease.	Date.	Sex.	Age.	Disease.
Nov. 5.	F.	9 mo	lung fever,		F.	60 yrs	inflammation in the bowels
	F.	85 yrs	brain fever		M.	31	consumption
6.	F.	33	consumption	10.	M.	46	pleurisy
	F.	5 mo	lung fever		F.	18 mo	dropsy in the head
7.	F.	86 yrs	consumption		M.	4 d	
	M.	12	do.		F.	43 yrs	consumption
8.	F.	15 mo	infantile		M.	8	measles
	F.	52 yrs	consumption	11.	M.	60	consumption
9.	F.	16 mo	measles		M.	50	intemperance
	F.	2 yrs	do.	12.	F.	67	
	M.	79	cancer	13.	F.	4	
	M.	17 mo	measles		M.	22-3	lung fever
	F.	92 yrs	old age	14.	F.	7 w	measles
	F.	8	measles				

Males, 10—Females, 17. Total, 27.

ADVERTISEMENTS.

NEW BOOKS.

CARTER & HENDEE have just published and for sale—

A *Manual of Materia Medica, and Pharmacy*, comprising a concise description of the articles used in medicine; their physical and chemical properties, &c. &c. By H. M. Edwards, M.D. and P. Vasseur, M.D. Translated from the French, with additions, &c. by Joseph Tongo and E. Durand.

Examinations in Anatomy, Physiology, Practice of Physic, Surgery, Chemistry, Materia Medica and Pharmacy, for the use of students. By Robert Hooper, M.D. from the last London edition, with upwards of one hundred additional questions, and an entire new chapter on Poisons.

The American Journal of the Medical Sciences, No. 11, for November, 1829.
Nov. 24.

A NATOMICO-SURGICAL DRAWINGS, and Descriptions of all the Surgical Operations, according to the most approved methods. By L. J. VON BIERKOWSKY. Translated from the German. In two volumes, and 570 drawings on 58 folio plates.

EXTRACTS FROM THE PROSPECTUS.

"Encouraged by the approbation of the Medical Profession, it is proposed to publish a work under the present title."

"This work contains 570 drawings, on 58 plates folio; to which is annexed, in two volumes 8vo. a concise explanation of each surgical operation. The plates exhibit not only the parts interested in operations, in their natural position and size, but, what is much more important, represent the different acts or stages of the whole operation, while others exhibit delineations of such morbid affections as consist in the change of the natural position, structure, color, &c. In order to afford the work at a moderate price, the plates will be Lithographic; and for the purpose of securing perfect accuracy, engagements have been entered into for their preparation in Berlin, under the especial direction of two of the most distinguished Professors of the University of that city."

A specimen of the translation, and the plates, is deposited for inspection at the Bookstore of CARTER & HENDEE, who receive subscriptions for the work.

Subscribers will be furnished with the work, and the first impressions of the plates, at the price of \$30.

The subscription list will be open until the 1st of November, 1829, after which period the price of the work will be raised to \$40.

P. S. For the accommodation of subscribers the work will be issued in five Numbers, at \$6 each, payable on delivery. Sept. 29. 1829 2N1D.

CARTER & HENDEE have just published,—*The Constitution of Man, considered in Relation to External Objects.* By GEORGE COMBE.

From the Preface to the American edition.

"Mr. Combe's work should be placed with those, of which so many within a few years have appeared, which are devoted to the all-absorbing topic of Education. It treats of moral, intellectual, and physical education. This is not formally done under so many distinct heads. But the whole course of reasoning of the author, and the whole array of all his illustrations, have it always obviously in view to show how the highest cultivation of each of these may be most surely brought about.

"The publishers have printed this edition on a belief that there is much in the work to interest the community.

"It has a novelty to reward the general inquirer, and it presents the well known under novel aspects. There is one class amongst us who may study it with much advantage. Scholars are referred to, a class here too small to form a distinct order with habits of their own, and who insensibly fall into those which, although not mischievous, to the multitude on the score of health, too often make ill health the portion of the sedentary student, and bring upon him premature decay.—To all classes it is recommended, and the various learning and acuteness of the author well fit him to write a book which addresses its instructions to the whole community." Sept. 8.

A TREATISE on the Scrofulous Disease, by C. G. HUFELAND, Physician to the King of Prussia, &c., translated from the French of M. Bousquet, by Charles D. Meigs, M.D., is just received and for sale by CARTER & HENDEE.

Sept. 8.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

THE BOSTON

MEDICAL AND SURGICAL JOURNAL.

Vol. II.]

TUESDAY, DECEMBER 1, 1839.

[No. 42.]

I.

PHYSIC AND SURGERY.

The following is an extract from Mr. Lawrence's Lecture, introductory to his Course on Surgery at St. Bartholomew's Hospital,—the theatre on which the genius of ABERNETHY has been so long and luminously displayed, and from which he has recently retired.

THERE has been as much difficulty experienced in France as in this country, in defining the limits between the two professions. I am convinced that the boundary, as now fixed, is not very clear, and the consequence is, that great disputes have arisen. Operations, injuries, and external local complaints, are the undisputed possession of surgery, and internal diseases are assigned to the physician. But it is not easy to distinguish between external and internal diseases; here, in fact, surgery and physic join. Since it is found thus difficult to draw a satisfactory line of demarcation between physic and surgery, you will not be surprised to find, in a great majority of instances, that both are practised together, in this country, by one description of persons,—surgeon-apothecaries. Nineteen twentieths of diseases are under the care of this class of persons in the country, who are therefore styled general practitioners. On the other hand,

in the metropolis, we find that these two branches of the profession are exercised by a different class of persons, whose education differs widely in some important points. We find it taught by separate teachers, in distinct courses of instruction, and we find this regulation enjoined by the laws of two distinct incorporated bodies.

Finding these contradictions, we are led to inquire more particularly into the distinctions between physic and surgery,—to ask whether it consists in the nature of the disease allotted to each, or in the mode of treating it,—to inquire whether there is any difference in the mode of learning them,—to ask how and when the distinction originated, whether it is well founded, whether it is of any benefit to the public, or any advantage to the practitioner? Nothing like the modern distinction was known to the ancients; at least, we find no traces of it in the Greek, Roman, or Arabic writers. Particular branches of medicine were indeed followed separately in Egypt, where the diseases of the eye, and some internal organs, formed the distinct occupation of different practitioners; and a distinction somewhat similar is said to have prevailed at Rome. But Hippocrates, Galen, and Celsus, treat of the nature and management of fever, of injuries, and of external and internal complaints in common. Celsus, in

speaking of the treatment of diseases, distributes what he has to say under three divisions, the same as are this day employed, according as the treatment is to be accomplished by dietetical, pharmaceutical, or chirurgical means. But the idea of splitting medicine into two parts, and learning the practice separately, seems never to have been entertained by this writer, nor any other great author whose name is still regarded as authority.

In the long night of barbarous ignorance which intervened between the downfall of the Roman empire and the revival of learning in the West, the treatment of diseases was preserved by the ecclesiastics. The exercise of medicine harmonized well with the more immediate object of their calling. But when the Council of Tours had declared,—*ecclesias abhorret a sanguine*,—that the church was defiled by blood, the priests and monks could no longer use any of those means that involved the loss of blood, and the practice was taken up by infidels and itinerants. In the course of time, surgery, which then consisted merely of bleeding and tooth-drawing, fell into the hands of a few persons who practised these in conjunction with the trade of the barber, and which ultimately led to the incorporation of the barbers and surgeons into a company. This separation of surgery from that medical knowledge which is an indispensable guide to its proper application, and its union with the art of the barber, long survived the circumstances that gave rise to it. It continued in this country till the middle of the last century, when it was dissolved in the reign of George II. The combination of the two branch-

es still remains in many parts of Europe.

In order to determine whether there is any real ground of distinction between physic and surgery, it is necessary to advert to the general practice of both. The individual organs which make up the human body, although various in their structure and office, are all intimately connected with and dependent upon each other. They are subordinate parts of one great machine, and all concur in one common object,—the life of the individual. All the leading arrangements are calculated to give a character of unity to the organic and living actions of the body. There is one source of nutrition of the whole frame; there is one centre of circulation; there is a common place of union of all senses and volition,—a common centre of nervous energy. The various organs are not only intimately connected, but act on each other by a mysterious, or at least hitherto unexplained cause, which is denominated sympathy. Every part composing our frame acts dependently; all the parts are immediately or remotely connected; and hence you could form no adequate idea of the sympathies of the organs, if you insulated them from the rest, any more than you could estimate the use and action of a single wheel or lever detached from a watch or steam engine. As a united machine, though complicated, is essential to accomplish the end for which it is formed, so living actions, although numerous and intricate, form an indivisible whole. Hence there is one anatomy and one physiology, and there can be only one pathology. If you wish to understand any part, you must not only examine the part itself, but must survey

the whole. In the same way, if you wish to investigate disease, you must observe not only the local affection, but the influence that other parts may exert over the seat of the complaint.

It must be the first business of the medical student to examine the structure and living actions of the frame ; that is, to study man in a state of health. These are the objects of the two sciences, which are denominated Anatomy and Physiology. He then proceeds to observation. He notices the circumstances under which disease arises ; he watches its progress, and its fatal termination ; he explores the organic changes it produces after death ; and learning to connect these with the appropriate external signs by which the disease is accompanied, and deriving from these comparisons the means of ascertaining the exact seat of the disease, he is able to foretel its fatal termination. This forms the subject of two other branches, which are distinguished by the names of Morbid Anatomy and Pathology. Morbid anatomy is opposed to anatomy ; pathology is opposed to physiology. Anatomy regards the healthy structure ; morbid anatomy the diseased one. Pathology regards the diseased functions ; physiology those that are healthy. The student is now prepared to apply the external influences, such as diet, climate, exercise, the outward or inward remedies, or the surgical operations which may be necessary for the removal of disease, and the restoration of health. The real question relative to the distinction between physic and surgery, then, comes to this : after treating disease generally, in the way just mentioned, can you discover any

portion of it insulated from the rest ? Can you find out any division that can be undertaken without a reference to other parts ? Can you divide the subject of disease into two classes that may be treated in a different manner ? Certainly not. The structure and functions are universally connected ; no part is independent. The causes that constitute disease are often to be found, not in the part itself, but in a remote portion of the frame ; the means of cure are seldom to be applied actually to the part diseased : for instance, if a person has a gouty inflammation of the toe, no cause of disease can be ascribed to the part itself ; but if you examine the state of the individual, you will find a full and strong pulse, and other marks indicating a fulness of habit, or plethora, as it is called ; the tongue will indicate a disorder in the digestive organs, and your treatment must consist in adopting the means necessary to remove the fulness of habit, and to correct the digestive organs, and the patient goes on well without any application to the toe. Another person may have a paralytic affection of his finger, and you can discern no cause for it in the part itself ; you will find everything in the paralyzed member perfect as to structure ; but, on examination, you find disease existing in the head ; you take the means of allaying that disease, and then the paralyzed parts recover the power of motion. In many cases, disease originating in one part, affects a great many other organs of the body ; and very often the secondary disease thus produced, attracts more attention than the original complaint itself. A person has an affection

of the head, which may be produced by various causes, and within a short time the circulating system, the digestive organs, and the secretions, become deranged, and he is in a state of continued fever ;—another individual receives an injury,—inflammation is set up in the part, and in a short time the same febrile disturbance arises. The patient has a sympathetic fever in both cases, and the latter disease seems of more consequence than the former. Again, although individual organs are numerous, the components of organic structure in the body are few ; the different proportions in which they enter into the composition of parts, is what makes the difference, just as the combination of a few letters give the infinite variety of words. When you have arranged and divided the causes of disease into two halves, you may give those different names, and require that they should be practised by different individuals, but the two divisions that you establish will be like each other, and the cause and the treatment of disease will in both cases be exactly similar. If you will insist on a distinction, it must be arbitrary. Then you can establish it clearly. You may divide diseases into those of the right side and of the left, or into those of the upper and lower halves of the body.

To assert that surgery and physic are essentially distinct, would be to say that there are two descriptions of pathology,—that the external and internal parts of the body were to be treated on different and distinct principles. When you reflect that the primary tissues composing the various organs of the body

are the same throughout, and that the difference consists solely in the number and proportions of those tissues, you will see that the various parts of the body can not alter the nature of the disease, though perhaps there may be a difference in the mode of its treatment ;—the way in which it is to be carried into force may be varied, because local applications may be made to the external parts which cannot be done to those that are internal. We treat the disease in the same manner, whether it is in the eye, the breast, the testicle, the heart, the lungs, or the liver. The principles of pathology, therefore, are general ; they are the same in all parts of the body ; and they must be common to the physician and the surgeon. Hence we may say, as Mr. Abernethy has most justly done, that surgery and physic, considered as objects of scientific information, are one and indivisible. We may with great propriety affirm, that no single branch of medicine can be acquired except by those who have studied the structure of the whole frame.

By those who are inclined to defend existing distinctions, various views have been taken as to the ground on which they ought to rest : for example, external diseases have been referred to the surgeon ; those that are internal to the physician. But, unfortunately for this distinction, nature has connected the outside and the inside of the body so closely, that it is impossible to say where the one terminates and the other begins. If we were to adopt this distinction, we should consider how far the exterior of the frame extends, and how far

the province of the surgeon is to go ; whether it is to extend half an inch into the body, or an inch ? What is the boundary of the internal cavities and of the external outlets : for example, those lined with mucous membrane ? The distribution of disease between the physician and surgeon seems to be absurd. The surgeon is allowed to take care of the diseases of the mouth : where, then, is he to stop ? Inflammation of the throat, arising from syphilis, is referred to the surgeon,—catarrhal inflammation to the physician ;—polypus of the nose is assigned to the surgeon,—a coryza of the same part is entrusted to the care of the physician. The diseases of the bones and of the joints have been considered a part of surgery, and yet they are hardly to be called external parts. In hernia and aneurism there is an external tumor, but they are produced by the diseases of parts that are quite internal. When we come to consider the cause and nature of disease, the absurdity of the distinction becomes more apparent, and the indispensable connexion between particular parts of the frame more obvious. External diseases are often produced by internal causes, as erysipelas, nettle-rash, gout, &c. ; and on the other hand, external agents produce inward disease, as in rheumatic inflammations and catarrhal affections, from exposure to cold. The eye, considered as an external part, has been entrusted to the surgeon ; yet that organ is the most complicated in the body, and is subject to so great a number of diseases, that it requires a greater knowledge of the principles to be derived from general pathology and therapeutics, than any other part. The eye, together with its appendages, not only contains mucous, serous, fibrous, and glandular structures,—parts peculiarly liable to disease,—but it suffers from gout, rheumatism, smallpox, scarlet fever, and measles : it is affected by scrofulous and syphilitic inflammation ; by cancer, fungous hæmatodes, and melanosis. If, then, an organ so complex in its structure, and subject to such numerous diseases, as the eye, can be safely entrusted to the care of a surgeon, I am at a loss to know why any distinction should be made, so far as disease goes, between surgery and physic. It is vain to establish distinct professorships for external and internal pathology, that surgery and physic should be taught by distinct lecturers, and in separate courses of instruction. Neither lecturers nor authors can make the distinction, and thus we find the same diseases are often considered by both ; they are treated on the same general principles, and regarded in the same manner. Again, local diseases have been given to surgeons, and general ones to the physician. It really may be a matter of question, whether there be any local or general diseases, in the strict sense of the terms. When an organ of little consequence in the animal economy is slightly diseased, no sensible effect may be produced beyond the part itself ; but when an important organ is considerably affected, then a great number of other parts feel its influence : hence arise general or constitutional diseases. Even in fevers, we can trace the general affection to some particular organ ; and the existence of fever as a

general disease, independent of primary local mischief, may be made a matter of doubt. Thus, the distinction of general and local disease consists in degree, and not in kind ;—it is a question of more or less. If you were to arrange diseases in one column, beginning at the most local, and ending at the most general, you would find them passing insensibly into each other, without any marked separation.

It has been recommended that Surgery should be confined to cases that require manual proceedings, or operations of some kind. This notion seems to be just worthy of that ignorance to which the unnatural separation owed its origin, and of the dark period in which it occurred.

According to such views, the distinction would depend not on the difference in the treatment of diseases, but on the accidental and often-varying circumstances of the mode by which the object is to be accomplished. What shall we do with the numerous cases, such as affections of the head, gout and rheumatism, in which changes of diet and internal treatment are necessary, in conjunction with the manual proceedings of bleeding, cupping and leeching? What shall we do with the numerous cases, such as hernia, retention of urine, &c., which, after various internal remedies, are often followed by surgical operation? In many cases, it is a question of degree, whether internal remedies only shall be employed, or surgical operation shall be added. If it is meant to confine surgery to operations or manual proceedings, and to a merely mechanical department of the profession, I for

one must enter my strongest protest against such an arrangement. I should really feel myself degraded by exercising this kind of barber surgery. If this arrangement were carried into effect, it would not be necessary to study scientific principles. We might spare ourselves the toil and trouble of learning anatomy, physiology and pathology, altogether ; we might be contented to resign our profession into the hands of barbers, its original founders.

Historically speaking, we cannot deny that surgery originally consisted of this mechanical and subordinate part of the profession, which was practised by the permission, and under the sanction, of physicians. But surgeons have long since emancipated themselves from this bondage, and surely they will not again submit to such degrading trammels. They have cultivated, with ardor and success, the scientific department of the art ; they can appeal to the great progress which surgery has made since the middle of the last century, and to the present state of its progression. The good opinion of the public which they have secured, is not inferior to that of other scientific men. They can point, in the annals of medicine, to the names of men who have been the most signal contributors to the advancement of medical science. Among these, I would not omit to mention the name of the illustrious Pott. He was equally distinguished as an able practitioner, and a clear and elegant writer. I must, however, confess that he has been thrown into the shade, by the transcendent merits and more brilliant talents of his contemporary and rival, John Hunter. In

contemplating this extraordinary character, we are at a loss to discover whether he surpassed others most in his energy or his genius. The novelty of his views, and the splendor of his discoveries, excite our admiration, and we are lost in astonishment when we enter his museum, and view the treasures there accumulated. We can hardly believe that they could have been brought together by one individual. To this name must be added that of a kindred spirit, who entered with ardor into the path traced out by his great predecessors, and followed it into new regions of knowledge. I allude to the founder of this school, Mr. Abernethy, (cheers). Fellow laborers have not been wanting in France, Germany and Italy. It will be enough for me to allude to the names of J. L. Petit and Desault ; to Richter, Bichat and Scarpa. The two latter have been among the most distinguished writers of modern times.

The attempt to reduce surgery to its former limits, to bring it back to the art of bandaging, bleeding, tooth-drawing, and so on, which constituted almost its entire encyclopædia in the *venerable* times of barber-surgery, if it could be effected, would be no less injurious to the profession than to the public. The proposal now comes a century too late. In those cases in which local injury or disease exists in conjunction with a more or less general derangement, as in compound fracture with fever, in erysipelas, and in strangulated hernia, the patient requires to be attended by a person who thoroughly understands the case in all its bearings. The surgeon who only knows

the local, and the physician who understands only the general treatment of cases, are but half informed, and surely deserve less confidence than one who understands both. The confidence which ignorant persons are inclined to repose in what they call a combination of talent, is fallacious, if it consists of a surgeon who knows nothing of general, and a physician who knows nothing of local management : this is not a case, like that of grammar, where two negatives make an affirmative.

Let me take this opportunity of mentioning to you, that the mere performance of an operation is often the least part of a surgeon's duty, even in cases that require it. To judge whether or not the disease admits of cure by other means, to perceive when an operation becomes advisable, to determine when it is necessary, to prepare the patient judiciously for its performance beforehand, and to manage the case well afterwards, are points of superior importance.

Do not let it be supposed that I speak lightly of operations ; on the contrary, it is necessary for you to study carefully each part of your duty ; but I wish to caution you against attaching too much importance to the branch of surgery that you will most seldom be called upon to exercise. It is a great mistake to suppose that a surgeon is always employed in operating, however extensive his practice. It is the boast of modern surgery to have diminished the number of operations. I speak within limits when I assert that there are not so many operations performed now, by one-half or two-thirds, as when I first be-

gan to study the profession. This important difference to which I allude, has arisen from the improved knowledge of the nature and treatment of disease. Thus, whatever view of the subject we take, the same conclusion forces itself on our minds; viz., that there is no natural distinction between physic and surgery: they are inseparably-connected parts

of one science and art,—the practical principle of both having the same foundation, the different branches must employ the same means, because they have the same purpose to accomplish. Thus the great distinction turns out at last to be purely artificial,—to be founded on no fixed principle,—to be dependent on nothing but custom.

SKETCHES OF PERIODICAL LITERATURE.

MARSH MIASMA.

In a paper on the autumnal fever of Georgia, published in the Western Journal, Dr. J. C. Finley, of that state, has presented the result of his experience, during four years, in regard to the mode of production of febrile miasm. Dr. Finley is of opinion that too much stress has been laid on the decay of vegetable matter, as a cause of disease in the clearing of new countries; while the predisposing causes, such as the change of climate and habits, the unwholesome food and exposure, and the mental depression, which affect the settlers in a new region, have been too much overlooked. The impression in regard to the noxious qualities of marshes, has also, in Dr. F.'s opinion, been much too vague and general. A marsh, when covered with sufficient vegetation to screen it from the influence of the sun, is comparatively innocent. Situations in the neighborhood of millponds, which have previously been the haunts of fever, become healthy if the pond is drawn off early enough to allow the rank vegetation

usual in such places to spring up before the commencement of the sickly season.

A long continuance of warm weather is necessary, to give the exhalations of marshes sufficient activity to produce disease. "Hot and dry summers," says Dr. F., "are uniformly healthy. *Marshes, when perfectly dry, are comparatively innocent.*" Those seasons are most unfavorable to health which are distinguished by warm winds and a humid atmosphere.

It is a familiar fact in regard to intermittent fever, that it will outlast, by many months, or even years, the causes which produce it, and follow its subject into climes far remote from the place of its origin. A more remarkable fact is, that the seeds of this disease, sown during the summer and autumn, will sometimes take effect only in the succeeding season, having lain dormant in the system during several months, and being called into action by some very slight occasional cause. This predisposition, however, ceases after a few months,—*vernal* intermittents rarely appearing,

except in those who have suffered from the disease during the preceding fall.

It is further remarked by Dr. F., that trees or the brow of a hill form an effectual obstacle to the diffusion of fever. Many planters secure to themselves an immunity from attack, by simply leaving a certain extent of uncleared land around their houses. Elevated spots near marshes are insecure, though generally thought safe, and those who select them under this impression, are almost always disappointed. The town of Milledgeville, Geo., is mentioned in proof of both these positions. The town stands on the west bank of the Oconee, about half a mile from the river, upon two elevated ridges of land, running nearly parallel with each other. The streets on the brow of the hill, next the river, are proverbially unhealthy, while the remainder of the town is very much the reverse.

The views taken of this subject by Dr. Finley, coming as they do with the sanction of much experience and extensive observation, and being evidently uninfluenced by any preconceived theory, are certainly worthy of much consideration. In regard to the main points, they perfectly coincide with those adopted by Mr. McCulloch, and other distinguished observers abroad; and contribute together with them to furnish distinct and accurate information on this interesting topic of medical inquiry.

occurred to Mr. Charles Boll, is related in a late No. of the London Medical Gazette. The patient, a child nine years old, was startled while in the act of eating a plum, and the stone slipped into the trachea. The opening was made between the thyroid and cricoid cartilages. After eluding several attempts made by the surgeon, the foreign body was at length found in the trachea, and extracted. The wound did well.

It has repeatedly been remarked, that where tracheotomy was performed, and the substance lay too deep to be extracted, or could not be reached, it has afterwards been expelled at the orifice by coughing. In order to determine the probability of this occurrence by a large number of cases, a series of experiments was not long since performed in France, the result of which was somewhat remarkable. The trachea was successively divided in ten dogs, after various substances had been introduced to a greater or less distance below the glottis; and in all of these the body was cast out the moment the incision was made. These experiments were performed to remove the impression of the uncertainty attending the operation, and they furnish a strong argument in favor of its immediate performance in those cases in which the existence of a foreign body in the trachea has been clearly ascertained.

INTESTINAL OBSTRUCTION.

TRACHEOTOMY.

An interesting case in which this operation was performed, and which

A case of obstinate constipation is mentioned in the Edinburgh Journal for October, which, after resisting

the usual treatment by cathartics, injections, &c., at length yielded to simple mechanical means. A flexible tube, connected with a syringe, had been introduced into the rectum, for the purpose of dilating the intestine with warm water. When this means failed, the tube was passed higher up into the organ, until, at the distance of ten inches from the orifice, it encountered an obstruction. The obstacle was overcome with some difficulty, and the tube having passed through it, a discharge of liquid feces immediately took place, to the great relief of the patient. It was ascertained by the appearance of the tube, that the barrier had been formed by indurated and scybalous feces. The case did well. The operation, simple as it was, appears to have been original with the practitioner who performed it, and certainly does credit to his readiness and ingenuity. It seems that he was at the time twelve miles distant from his residence, which was in Kirkwall, Scotland, had employed the few

medicinal agents he had with him (laudanum, ol. ricini and croton oil), and was unable, at any less distance than that above mentioned, to procure a new supply. This country practice is certainly, what we have been said to say to the contrary notwithstanding, an excellent sharpening of the wits.

RHUS GLABRUM IN PTYALISM.

We learn, from a paper in the American Journal, that this article has been employed with great success in ptyalism arising from the use of mercurials. The preparation recommended is an infusion of the inner bark of the root, which is to be used as a gargle and a wash for the mouth. The berries, prepared in the same way, are already in extensive use as a refrigerant in fevers, and a topical application in sore throats. The author of the paper, Dr. Fahnestock, gives particular directions for distinguishing this species of *Rhus* from the others, many of which possess widely different qualities.

BOSTON, TUESDAY, DECEMBER 1, 1829.

TREATMENT OF HYDROCEPHALUS.

A LATE English writer on the diseases of women, &c. gives a very interesting chapter on a complaint of children commonly attributed to congestion of the brain;—a complaint apparently resembling what Dr. Marshall Hall has termed “a morbid affection of Infancy, arising from exhaustion, but resembling Hydrocephalus.” The writer referred to

gives the result of several dissections which throw much light on the treatment of this disease. In these cases the children had been kept for several days under the influence of purgative medicines and leeches, for the purpose of subduing cerebral congestion. He found, on examination, the bloodvessels of the brain containing an extraordinarily small quantity of the vital fluid, and an abundance of serum in the ventricles.

The conclusion drawn from these dissections is inevitable,—namely, “that there may be effusion of serum from a state opposite to congestion, and that the depletory treatment, which is used so actively to prevent it, may sometimes be the cause of it.”

Dropsy in persons of all ages does often result from a debilitated state of the system, and effusion is known often, perhaps most often, to occur where no inflammation, no active visceral disease exists. In the management of children presenting symptoms of hydrocephalus, this fact ought at least to be kept in view,—we ought to remember that tonic treatment and country air are far more applicable to many such cases than bleeding and purging, which are too often resorted to as matter of course.

UNITED CHILDREN.

SCARCELY a journal reaches us but contains some case or cases of foetal monstrosity. From the great rapidity with which such unhappy occurrences are accumulating on the records of the profession, we should be inclined to believe we live in an age of wonders. The whole truth, however, appears to be, not that the idea of one such monster in the mind of the female *enceinte*, is the occasion of others, but that the contagion is in the *publication* of these cases. Many which are but just brought before our notice, occurred years ago, and in the truth of their wisdom, the medical attendants have thought it best to let the unfortunate events pass by in silence,—a mode of disposing of them in which they have doubtless found a most cordial aid

in the feelings and wishes of the parents.

The arrival and public exhibition of the Siamese brothers, has been matter of such general remark, that the dread of such subjects has been in a great measure done away, and almost every practitioner who finds a parallel case in his note book or in his memory, thinks that this is the time to lay it before the profession. By comparing the dates of the instances lately published, we believe it will be found that no one year has been greatly more productive of such monsters than any other, and that the explanation above given is correct. The following letter, addressed to Mr. Charles Bell, and published in the London Medical Gazette, justifies this view of the subject.

MY DEAR SIR,—A recent excursion to Switzerland gave me occasion to see, on the 1st of August last, at Geneva, a remarkable example of a living *lusus naturæ*, or monstrosity in the human frame; namely, twin infants furnished with two heads, two necks, and four arms, but grafted or united side to side, so as to form only one female body, terminating in two legs, or inferior extremities, of usual shape. This phenomenon presents nothing disgusting to the beholder; on the contrary, the intelligence which already begins to develope itself in the heads, makes it an object of great interest. I had not the opportunity of a very minute personal examination, in consequence of only seeing it at the hour of its daily exhibition to the public; but my observation verified the accuracy of the subjoined description, by Mons. F. Mayor, which was published in the *Journal de Genève* of the 30th of July:—

Marie-Terèse Parodi, 32 years of age, the mother of several perfect

children, gave birth, on the 12th of March of the present year, to a double child, now 140 days old. The one to the left was baptized by the name of Christina, the other by that of Harriet.

At the first glance it is perceived that the twin infants have become grafted together; however, when they are regarded before, the lower parts of the body appear simple from the stomach downwards, while the chest is divided at its upper part, at least on one side of the trunk. A more attentive examination speedily enables us to recognise the following peculiarities:—Anteriorly, the chest only appears to form one thorax: the sternum forms a kind of gutter at its inferior part, while above it widens and enlarges very much, in order to give attachment to four well-formed clavicles, two of which are fixed at the external angles of that bone, and the other two at the middle of its superior border. Each of these four clavicles is directed towards one of the shoulders, and gives all the support necessary for the movements of the arms, of which two are placed between the heads. The right edge of the sternum appears to give attachment to the right ribs of Harriet, and the left to the corresponding ribs of Christina. There are four *mammæ*, the two in the middle being smaller than those which are external to them, and are encroached upon by the armpits of the middle set of upper extremities. There is but one umbilicus. When the examination is made from behind, two spinal columns are distinctly seen, sufficiently separated from each other at the upper part of the body; but they approximate towards the sacrum, of which there are two, united by the left edge of the one and right of the other, in such manner, however, that the *ossa cœcygis* are quite distinct. From each vertebral column there arise ribs, which are directed towards each other: the four or five first run to the anterior

sternum; but the rest are united to those of the neighboring body, at least by their external surface, and appear only to form one circle with those of the anterior part of the trunk. Thus, then, the thoraces are really separated externally throughout their upper third, and probably entirely so within: the posterior ribs of this double trunk participate in the movements of respiration in the same way as those of the anterior part. The beating of the heart in Christina is perceived at the anterior and left surface of the trunk; the beating of the heart in Harriet is seen at the middle part of the posterior surface. Beneath the ribs of this same side there is, between the two spinal columns, an abdomen twice as small as that on the anterior surface of the trunk. Harriet has had from her birth some malformation of the breast, for it is not long since the blueness with which she was affected began to disappear. For some days she has had a catarrhal affection, and her pulse was at 168 in a minute; while her sister enjoyed perfect health, the pulse not exceeding 144 in the minute. Their breathing is not always synchronous; however, there is reason to believe that a communication exists between the lobes of the lungs of the two children. The one sometimes sleeps while the other is awake,—sometimes sucks while the other plays, or wishes also to get the breast; but never has one an evacuation without the other making the same efforts, which even wake her, if asleep. As they grow older, other and yet more interesting phenomena will doubtless be observed.

Examples of this kind of union are happily but little common, and it is rarely that they survive their birth. A good many cases, indeed, are mentioned by authors, but most of them are apocryphal; some, however, are well authenticated: such, for example, as the two Hungarian girls, spoken of by Buffon, who were

united by the loins, and who lived 21 years. Another case of a similar kind occurred at Verdun, in 1709: here also two females were united, and in the same manner: they were then seven years of age, and could walk; and their intelligence was so great that they had acquired several languages. There is also an instance in which two little girls were united from the lower part of the sternum to the umbilicus. *The accoucheur divided the parts; and thus separated by an operation, the children lived.*

In 1495 there were born, near Worms, twins united by the forehead: they lived for ten years, when one died, and the other was separated by an operation; but it proved unavailing.—In 1525, a native of Savoy, 30 years of age, and of the ordinary stature, exhibited himself. He had, hanging from the sternum, a body about a foot in length, having feet and arms, but without motion, while the head appeared, as it were, planted in the body of the man.—In 1538 there was, in Bavaria, a female mendicant with two heads, who was driven from the country lest the pregnant women should give birth to similar monsters,—a fear as imaginary as the result of it was cruel and uncharitable. Buchanan, in his History of Scotland, mentions the case of a monster with two heads, which lived 28 years. The two heads, having different volitions, often quarrelled. They both felt wounds of the lower part of the body, but those of the upper part were only perceptible to the corresponding head.—In 1552, a French woman at Geneva, was brought to bed of a monster, the heads of which were united by the posterior part, and the union extended to the lower part of the back. Gaspard Materier took a portrait of it. The monster lived some hours, and is compared to Janus by a writer (Lycosthene) who describes it.

Before we conclude, we may allude to the opinion which has been

frequently started and recently renewed, that such monsters ought to be destroyed immediately after their birth. *No one can have a right to do so;* for since God ordains that such beings should come into the world, the laws owe them protection. Besides, it would be very difficult to determine the degree of imperfection at which an infant would cease to have a right to live; for these phenomena are met with from a simple supernumerary tip of the ear, up to the example above-mentioned, of two girls who were successfully separated by an operation.

The catarrhal affection, with febrile excitement, under which the twin named Harriet labored on Thursday, the 28th of July, noted by M. Mayor, had subsided on the 1st of August, and she then had an appearance as healthy and lively as Christina. Both infants seemed to exercise some control over the motion of the lower limbs; but should they live until their mental faculties and animal powers are further developed, it will become a matter of curious inquiry to ascertain in what manner nervous influence, springing from two distinct organs of sensation and volition, shall be directed towards the lower extremities, so as to effect locomotion in accordance with the will of each sensorium; or whether there shall be occasional contentions between the heads for a dominating power over the legs.

Although the precise peculiarities of structure in the abdominal viscera, and the question as to whether the internal organs of generation correspond in unity and simplicity with the external, are points which cannot be fully determined till after death; yet, from the circumstance of each infant taking food with avidity at different times, it may be inferred that each has its proper stomach, and that the union of the alimentary canal takes place below that organ.

Many facts desirable to be ascer-

tained hereafter, during the growth of this extraordinary animal phenomenon, must arise, referring especially to anatomy and physiology; and as you have been long an eminent professor of these branches of medical science, I am induced to address to you this letter, in the belief that it may invite you to gratify your own zeal, and to indulge that of the profession, by instituting farther inquiries, from time to time, regarding the interesting subject of it.

I remain, my dear Sir,

Very faithfully yours,

J. BORLAND.

The subject being open, many questions present themselves to the mind which seem difficult of solution. The exact nature of such connections, and their precise effect on the physical and moral identity of the individuals united, are, we apprehend, in a fair way to receive solutions from an actual observation of phenomena which must occur in such persons, in the course of a life so beset with ills as that they are destined to live. To our readers, the effect of disease and of death in one, on the health and life of the other, taken in connection with the parts united or common to both, is perhaps of all these questions the most interesting; and the following case from a western periodical, seems not to confirm the commonly received opinion on this subject. For this reason, and as matter of record, we have thought it worth preserving. It was published by the medical attendant, Joshua Martin, M.D., of Zenia, Ohio.

On Monday, the 31st of August, 1829, I witnessed a most extraordinary *lusus naturæ*, of which I am induced to publish a brief notice.

The wife of a gentleman of this

vicinity was delivered, on Saturday, the 29th of August, at the close of the eighth month of utero-gestation, of two living children, of ordinary size, who were attached together by a round substance, of about three inches diameter, commencing at the ensiform cartilage, or lower end of the breast bone, and extending down the abdomen.

The superior part of the attachment was hard and cartilaginous, formed by the ensiform cartilage of the one extending across and uniting with the other; below, it was soft, and gave the sensation, to the touch, of a membranous sac, containing part of the abdominal viscera.

At the inferior part of the connecting medium, the skin was wanting; and at that point arose one umbilical cord, which served both children.

Anastomosis, or union of the superficial veins of the two children, could be distinctly perceived. They were both females, and in every respect natural, except that one had two thumbs on the left hand. I saw them about forty-eight hours after their birth; one of them had been dead twelve hours, and the other died in a few hours afterwards.—*Far. Rec. and Zenia Gaz.*

Ununited Fracture of the Os Femoris, cured.—A boy was admitted into the Bath Hospital, under the care of Mr. Henry Lyford, with a fracture of the thigh, produced eleven months before, and which had been treated in the usual way, but without any union having taken place. On his admission, an oblique fracture was evident, "rather above the centre of the femur, at which part there was a very considerable degree of motion, so much so, that the disunited portions of bone could be made to form an obtuse angle, and that without producing the slightest pain or inconvenience. The foot and leg quite œdematous, and much everted, the limb one inch and a quarter

shorter than the opposite extremity, and incapable of being elongated by extension. There appeared to have been an unusual degree of constitutional languor and inactivity, manifested by a very slow and feeble pulse, extreme coldness of the hands and feet, pallid countenance, dry skin, and impaired appetite, with constipated bowels.—Ordered a large blister to be applied on either side of the thigh, contiguous to the fracture; meat diet; a pint of porter daily; the bowels to be kept open by equal parts of the mercurial pill and extract of aloes, and three spoonfuls of the compound mixture of steel to be taken three times a day.

"On the twelfth day, the blisters having totally failed to produce any effect in the way of exciting ossific inflammation, Mr. L. introduced a seton between the end of the bones. At the expiration of two months from the time of his admission, he was discharged cured."—*Lon. Med. and Surg. Journal.*

Gonorrhœa and Chancre.—We learn from a communication by M. Gibert, in the *Nouvelle Bibliothèque Médicale* for March last, that M. Bielt had under his care a man who was afflicted with gonorrhœa, caused by cohabiting with his wife shortly after delivery, and during the continuance of the lochial discharge. The gonorrhœa being suppressed in a great part, an acute purulent oph-

thalmia supervened. We learn from the same source, that there was, in the hospital of St. Louis, a patient with a large ulcer on the internal surface of the prepuce, and at the base of the gland, caused by having connexion with a woman a few days after her delivery.

These cases are conclusive, as showing the non-specific nature of these diseases. We have known gonorrhœa several times induced by cohabiting with a woman during or too soon after menstruating; and chancres, and also gonorrhœa, produced by the leucorrhœal discharge. *American Journ. of the Med. Sci.*

Case of Hydatid Tumor simulating a Crural Hernia.—M. Pigeotte, Physician of the Hôtel Dieu of Troyes, in examining a female subject, observed two tumors, one on each side, resembling crural hernia. The one on the right side was reduced by taxis: being preceded by a fold of intestine, that on the left resisted all efforts at reduction, and on dissection proved to be a hydatid tumor.—If this woman had been attacked with disorder of the bowels, attended with symptoms analogous to those produced by strangulated hernia, she would no doubt have undergone an operation.—*Nouvelle Biblioth. Med.*

NOTICE.—Mr. Barnet Peters is no longer Agent for the Med. Journal.

WEEKLY REPORT OF DEATHS IN BOSTON, ENDING NOVEMBER 21.

Date.	Sex.	Age.	Disease.	Date.	Sex.	Age.	Disease.
Nov. 13.	F.	5 yrs	dropsy in the head		F.	8	dropsy in the head
	F.	16	affection of the head		M.	8	accidental
	F.	66	inflammation in the bowels	17.	M.	14 mo	measles
44.	F.	35	consumption		M.	18	quinsey
	F.	12 mo	unknown		M.	62 yrs	hydrothorax
	M.	48 yrs	consumption	18.	F.	8	lung fever
	F.	9	chronic fever		F.	22	childbed
15.	F.	36	childbed		M.	4	measles
	M.	21	typhous fever		M.	6 mo	croup
	M.	3	measles	19.	F.	29 yrs	consumption
16.	M.	27	mortification	20.	F.	3 d	unknown
	M.	4	burn	21.	F.	21	dropsy

Males, 11—Females, 13. Total, 24.

ADVERTISEMENTS.

NEW BOOKS.

CARTER & HENDEE have just published and for sale—

A Manual of Materia Medica, and Pharmacy, comprising a concise description of the articles used in medicine; their physical and chemical properties, &c. &c. By H. M. Edwards, M.D. and P. Vasseur, M.D. Translated from the French, with additions, &c. by Joseph Tongo and E. Durand.

Examinations in Anatomy, Physiology, Practice of Physic, Surgery, Chemistry, Materia Medica and Pharmacy, for the use of students. By Robert Hooper, M.D. from the last London edition, with upwards of one hundred additional questions, and an entire new chapter on Poisons.

The American Journal of the Medical Sciences, No. 11, for November, 1829. Nov. 24.

CONSOLIDATED COPAIVA.

“**COPAIVA** may be given in this form without the least inconvenience. Neither communicating taste, nor imparting odor to the breath, it is also retained without the least disquietude or uneasiness to the stomach; and I am informed by Dr. Rosseau, that in large doses it does not purge.”—*Phil. Journal of Med. Sciences.*

See an article in this Journal, Aug. 18th.

EUROPEAN LEECHES.

An excellent lot of European Leeches, which will be sold at a reasonable price, or applied, in any part of Boston or in the vicinity.

For sale by **NATHAN JARVIS**, 183 Washington Street, where Physicians will find medicines at as reasonable terms as at any place in Boston.

Aug. 25.

copf.

MORBID ANATOMY.

CARTER & HENDEE have just received.—The Morbid Anatomy of the Stomach, Bowels and Liver; illustrated by a Series of Plates from Drawings after Nature, with explanatory letter press, and a Summary of the Symptoms of the Acute and Chronic Affections of the above-named Organs. By **JOHN ARMSTRONG**, M.D.

The above work will be completed in

six numbers, at \$6.00 each. Three numbers are already published. Subscriptions received by C. & H.

Oct. 6.

2am3m

MEMOIR OF DR. HOLYOKE.

JUST published, and for sale by **CARTER & HENDEE**,—A Memoir of **EDWARD A. HOLYOKE**, M.D. LL.D., prepared in compliance with a vote of the Essex South District Medical Society.

CARTER & HENDEE have just published,—The Constitution of Man, considered in Relation to External Objects. By **GEORGE COMBE**.

From the Preface to the American edition.

“Mr. Combe’s work should be placed with those, of which so many within a few years have appeared, which are devoted to the all-absorbing topic of Education. It treats of moral, intellectual, and physical education. This is not formally done under so many distinct heads. But the whole course of reasoning of the author, and the whole array of all his illustrations, have it always obviously in view to show how the highest cultivation of each of these may be most surely brought about.

“The publishers have printed this edition from a belief that there is much in the work to interest the community.

“It has a novelty to reward the general inquirer, and it presents the well known under novel aspects. There is one class amongst us who may study it with much advantage. Scholars are referred to, a class here too small to form a distinct order with habits of their own, and who insensibly fall into those which, although not mischievous, to the multitude on the score of health, too often make ill health the portion of the sedentary student, and bring upon him premature decay.—To all classes it is recommended, and the various learning and acuteness of the author well fit him to write a book which addresses its instructions to the whole community.”

Sept. 8.

A TREATISE on the Scrofulous Disease, by **C. G. HUFELAND**, Physician to the King of Prussia, &c., translated from the French of M. Bousquet, by Charles D. Meigs, M.D., is just received and for sale by **CARTER & HENDEE**.

Sept. 8.

Published weekly, by **JOHN COTTON**, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

THE BOSTON

MEDICAL AND SURGICAL JOURNAL.

Vol. II.]

TUESDAY, DECEMBER 8, 1829.

[No. 43.]

I.

**CLINICAL LECTURE ON THE OPERATION
OF LARYNGOTOMY.**

By CHARLES BELL, Esq., Surgeon of the
Middlesex Hospital, and Professor of
Surgery in the University of London.

GENTLEMEN,—At no time does the duty of the surgeon appear more important, than when he comes into the midst of a distressed family, one of whom is in danger of immediate death from suffocation; for the suddenness of the attack, the agony of the sufferer, and the real danger to life, are apt to agitate him at a time when he must be calm, decided, and dexterous. Before I read the case to you, I shall put certain preparations into your hands, to which I must refer in explanation.

[The lecturer here handed round the preparations, showing the natural structure of the larynx, and gave a short description of the anatomy of this part. He then drew attention to the peculiar sensibility residing in the glottis.]

This sensibility of the glottis calls into action the whole class of respiratory muscles. It is placed here for the purpose of guarding the entrance of the lungs; and if the smallest husk, or crumb of bread, alight upon this part, there is an immediate spasm, extending through all these muscles,

to expel the foreign body. But just in the same manner that this extensive class is roused into action, those little muscles which move the arytenoid cartilages and the chordæ vocales, contract spasmodically. Whenever anything foreign touches the highly-irritable spot in the glottis, these muscles shut up the narrow slit of the rima glottidis, and cause the sensation of suffocation. In such a case, therefore, as the present, when a foreign body is lodged in the windpipe, we have to observe that there is, at first, a sudden spasm, or fit of suffocation: after a time, this painful struggle relaxes; but it returns, and this return of the difficult breathing marks that the obstruction is spasmodic, and not mechanical.

In the course of the attack, these fits recur at shorter intervals,—they become more frequent, though apparently less violent; and you will observe how they are attended with flushing and turgescence of the face, with a bloodshot eye, great anxiety and struggling. But by-and-by a change takes place,—there is now no struggle, nor any effort to avoid suffocation,—there is no longer that animated and terrified look; but, on the contrary, the patient lies still; instead of the suffused face, his cheek is pale and cold, and his hand feels clammy. Had the obstruction been altogether

mechanical, the effects would be uniform; but being, as I have said, spasmodic, there is a deceptive appearance of improvement from diminished irritability. Seeing this change in his condition, his attendants think that he is relieved, and in the way of doing well; when, in truth, his case is desperate. These new symptoms arise from effusion taking place in the lungs. The difficulty experienced of drawing the breath through the narrow glottis, and the violent mechanical play of the lungs, bring on effusion into the extremities of the bronchiæ, or into the common cellular texture of the lungs; and of this, the pale leucophlegmatic countenance is the sign.

Thus, when the patient dies, the immediate cause of death is the state of the lungs; the remote cause is the spasm in the glottis. The inference which you are to draw from this is, that if you do not decide at the first what is to be done, but defer operating, there is danger of being too late: you may perform the operation, and remove the foreign body, but the patient will die from the effusion into the lungs.

Case of Foreign Body in the Trachea.

Sept. 1st.—Mary Waters, æt. 9, was admitted into the hospital at nine o'clock this morning, with symptoms of suffocation. The report given by the friends was, that yesterday afternoon, being in school, and eating a plum, the child laughed, and was reprimanded by the mistress, who gave her at the same time a slight tap on the cheek: at that moment the child was sensible that the plum-stone had got into her throat. She was immediately seized with a

difficulty of breathing, which has continued, with occasional severe attacks, ever since. A probang was passed into the œsophagus, and an emetic was given to her, before she came into the hospital.

It was evident that she required immediate relief. Mr. Bell said that he slipped, unobserved, to her bedside, so as not to disturb or frighten her, for the purpose of examining her manner of breathing. She lay with her head raised high; she was restless, shifting her position, and tossing her arms; her chest rose high, and her nostrils were dilated; the sound of her breathing was hissing, husky, and impeded,—it was in sudden gasps.

Having collected what tubes, probes and forceps were likely to be of use, the child was laid on pillows, placed on the table so that her position was inclined, not horizontal. This was done for two reasons,—because a person breathes with difficulty in the horizontal posture; and, because it permits the blood in the wound to flow outwards.

An incision was made through the integuments an inch and a half in length, the centre being opposite to the cricoid cartilage. The thyroid and guttural veins were seen turgid: it was not possible to avoid them, and they bled freely. Continuing the dissection on the forepart of the trachea, a small artery, the thyroidea anastomotica, was divided, and the wound bled considerably, so that the incision into the larynx was delayed a few minutes. The point of the scalpel was then thrust into the membranous space between the cricoid and thyroid cartilages. The child did not appear

at all relieved, or only in a very slight degree, by this opening.

"My disappointment was now considerable. When I had done this operation before, the relief was immediate: no sooner had the point of the knife penetrated the membrane, than the harsh sawing sound of the voice ceased, and the air came *siffling* through the wound; and when the end of the scalpel was used to hold apart the sides of the slit, and a quantity of mucus was discharged, the breathing was composed and easy."

The probe was passed upwards through the glottis into the pharynx, but nothing foreign was found interrupting the passage. The probe was then passed from the wound in the larynx down into the trachea, with every precaution, lest the foreign body might be thrust downwards by it; but nothing was to be discovered there. At this time the breathing was worse; the child's color was darker, and a degree of insensibility prevailed. A portion of a large gum catheter was passed down into the trachea, and retained there, and the child's face and neck were bathed with cold water. The breathing became sensibly easier, and the freshness of color returned to the cheeks and lips. The tube being withdrawn, further attempts were made to discover the stone, but without avail. Mr. Bell at this time thought of putting the child to bed, but, resolved to leave nothing undone, he explored the passage once more. He felt the pharynx with his finger introduced into the mouth. He then passed the catheter by the wound through the chink of the glottis, and examined the sacculi laryngis; he then sounded deep into the trachea; and now he thought he could feel a

roughness more than belonged to the cartilages. He therefore enlarged the incision downwards, and having bent the end of a probe so as to make a little hook, he passed it down into the trachea: by means of this, he succeeded in catching the edge of the stone, and brought it to be visible in the wound; then, with the small dressing forceps, he extracted it. It was half of the stone of a plum, and it had lain with its rough convex surface towards the concavity of the tube.

Immediately after the stone was withdrawn, the child opened its eyes and looked about, apparently with the conviction that the thing was accomplished. Nothing could be more striking, during the whole of the operation, than that a child so young should have so perfect a notion of the necessity of something being done for its relief, and that it should remain so submissive.

The wound was dressed superficially, and the child was put to bed, breathing freely,—to the great delight of those present, for it had been abundantly apparent that it was an affair of life or death.

Evening.—The child is perfectly quiet, and has slept a great deal.

Sept. 2d.—She is remarkably well; she speaks low, and complains of hunger. She breathes at present with perfect ease, and has done so ever since the operation. Leeches have been applied to the neck, and she has had some laxative medicine.

Sept. 12th.—The child is running about, and is quite well; but the wound is still open, and the granulations projecting. The zinc lotion is ordered, with compression by adhesive strapping.

Sept. 22d.—The wound is healed. Mr. Bell said that the father,

with the child in his arms, came running after him as he left the hospital, to return thanks. When he said to the father, "I am distressed that the child has not recovered its voice," he replied, "It was only her shyness; she speaks as well as ever she did in her life."

It is first to be remarked, gentlemen, that in this, as in former operations, it was the surprise of every one how deep the trachea and larynx lay in the wound. It is this which makes the operation difficult; the more so, that from dissecting the dead body, you are not led to expect it.

It is said in this case that I passed the probe upwards. The reason of doing this is, that foreign bodies are apt to be caught in the chink of the glottis, and it is necessary to push them up into the pharynx. But, indeed, I ought to have considered that in such a case the symptoms are more severe than those exhibited in the present. I passed the probe downwards in the absolute certainty of finding the foreign body there. I shall here show you how the surgeon may make a fatal error. A child was brought into the hospital some years ago in a state of suffocation, as it was said, from having drawn a pebble into his windpipe. The house-surgeon, seeing there was no time for delay, made an incision between the thyroid and cricoid cartilages, and he then passed a probe from this part up into the throat. Thinking he could do no more, he desisted. The child died; and on examining the part, it was found, on slitting up the trachea, that the stone was impacted not a quarter of an inch below the

incision. If he had turned his probe down, he would have touched the stone, and the child would have lived.

A case lately occurred in Dublin to a surgeon whose reputation has extended so as to make him well known to us here, which was attended with some curious circumstances.—A boy had rubbed down a plum-stone in its centre, so as to open its cavity, and make a whistle of it. While practising upon this whistle, it suddenly slipped into his windpipe. He could breathe, notwithstanding, without much difficulty, although he had occasional paroxysms of suffocation. Several days had elapsed before he presented himself at the hospital. To satisfy those around him that the stone was still in his windpipe, the boy began to whistle, of his own accord, upon his instrument. Without puckering his lips at all, he could produce a very clear whistle by merely throwing out the breath from his chest. With this evidence, the surgeon made an incision into the trachea; and when he had pushed a catheter through the chink of the glottis into the mouth, the boy called out that he felt the stone, and had swallowed it. Three days afterwards, however, he was again heard whistling as before. The breathing had continued impeded; and it was found, also, by the use of the stethoscope and percussion on the chest, that the lungs on one side did not expand in breathing. It was inferred that the foreign body was probably still lodged in the trachea, and that it might be covering one of the divisions of the bronchial tubes. The incision in the trachea was therefore enlarged a

little downwards, and the stone was expelled shortly afterwards during a fit of coughing.

In illustration of this fact, that a foreign body may be expelled by coughing, you will find some very interesting experiments performed upon dogs by M. Favier, as quoted by Sabbatier. He popped a foreign body into the glottis at the moment of inspiration. The animal was immediately convulsed, and it was thought he must have died, but he became so quiet that they deferred the further part of their operation for six hours. They then opened the trachea by dividing three of the cartilages, when the body was immediately forced out. The experiment was ten times repeated with a nail, a ball of lead, &c.; and although these were pushed deep with instruments, the body was cast out the moment that the incision was made. These experiments were performed to oppose the opinion which declared the operation of bronchotomy to be precarious, from the difficulty of discovering the body.

The most important part of a clinical lecture, gentlemen, is the confessions of the surgeon. I ought in this case to have determined in my own mind where the foreign body lay, for you will observe that the symptoms are different according as the body lies in the grasp of the glottis or the trachea. I might have known that if it had been in the sacculus laryngis, for example, the symptoms would have been more violent, and the danger more pressing.

In the case operated upon by the house-surgeon, the mother came running in with the child in

her arms, just after the pebble was swallowed, and in twenty minutes the child was dead. In the present instance the stone lodged lower down, and the child you have seen survived during the night. But do not delay performing the operation after you have ascertained that a foreign body is in the windpipe, because the child may be suffocated in the instant by the body rising from the depth of the windpipe, and being caught in the glottis. Thus a child, after drawing a cherry-stone into its windpipe, was nearly choked, but suddenly got relief; and some time after, while playing on the carpet, it was seized with another fit of suffocation, and died. The cherry-stone was found in the sacculus laryngis; and there can be no doubt that in the period between the two attacks, the cherry-stone had lodged deep in the windpipe, but that during the gambols of the child it had fallen forwards into the larynx.

In Pelletan's Clinique Chirurgicale, you will see a case where a surgeon performed bronchotomy on a child, and extracted a bean. The weakness of the child after the operation was such that they believed him dead; but he recovered, called on his parents, and cried to have his playthings, and yet this boy died in fourteen hours. Another boy had the operation performed, and died in consequence. The expression is strong, — "*le coup mortel était porté*;" although he lived for two months. Now the fatal termination in these cases was attributed to a gorging of the brain; and there is no doubt that a long-continued struggle for breath affects the circulation in the head in a very remarkable

manner. But it affects the lungs more directly and more violently. When a person dies from suffocation, owing to some disease of the throat, the lungs do not freely collapse on examining the body. Here, then, there is a proof that they have suffered, and to this danger I call your attention particularly. But let us in future be alive to the observation of Pelletan, of what takes place in the brain.

For some time after this operation I was very anxious for the child's life, and I shall state the reason of this anxiety. A woman was brought into the hospital, who, in her phrenzy, had plunged a penknife into her throat. It pierced the upper part of the thyroid cartilage, and entered at the union of the *cordæ vocales*. She was suffocated, at the end of some months, by the granulations which filled up the passage of the glottis. Another young woman, attempting to destroy herself, drew a penknife down the forepart of her throat,—not in the vulgar way of cutting it across. She thrust the knife into the trachea, and divided five rings of the tube. She survived the first effects, but was suffocated by the retraction of the cut edges of the cartilages, and the swelling of the inner membrane, which thereby diminished the capacity of the tube. You see, therefore, the source of my anxiety. When we saw the granulations spring out from this wound, it was natural to apprehend that such granulations might also sprout inwards. With regard to the possibility of the divided cartilages retracting, the manner in which I operated might possibly prevent this; for you will observe that my first in-

cision was made through the membranous space between the thyroid and cricoid cartilages; and when I enlarged it, I cut through the cricoid cartilage. Now you mark the peculiarity of this cartilage,—that it is a complete circle, and that, when divided, its edges will resume their place, being supported by the continuity of the hoop on the back part. The cartilages below, that is, the cartilages of the trachea, are not complete hoops, or rings; and therefore, when divided into two lateral portions, they may be displaced and retracted more easily. However, I must not omit saying that the windpipe has been divided with this perpendicular incision, without being followed with the consequences which I have apprehended, and which I have myself witnessed. I have recommended to my young friends to make experiments to illustrate this subject.

The last observation I shall make is less practical; but still it is very curious in a physiological point of view. When the probe was passed upwards, the child coughed and expressed uneasiness, which showed that the chink, and the parts above the chink of the glottis, were much more sensible than where we were operating.

It was also remarked that, although no sensibility was evinced on putting the probe downwards into the trachea, yet, when it was passed so far within the tube as to touch the bifurcation, coughing and indications of superior sensibility were produced,—as in touching the larynx.

[The operation of Laryngotomy is becoming more and more common

and successful, since the profession have been persuaded that it is necessarily attended with much less hazard than was formerly supposed. In all extreme cases it is, in fact, expected of the medical attendant that he will give his patient the chance of relief afforded by it;—we would recommend, therefore, to the particular notice of our readers, the foregoing Lecture from one of the most distinguished Surgeons of the age.]

II.

GANGRENOUS EROSION OF THE FACE.

MR. EDITOR,

DEAR SIR,—I take the liberty of sending you for publication in the Boston Medical and Surgical Journal, the history of a case of Gangrenous Erosion of the Face, which has recently come under my care,—it being one which seldom occurs, and upon which authors have not been very explicit. In fact, I have met with no accurate description of the disease in any standard work. In some of our medical journals, cases have been described very similar in their appearance, but most of them have ensued upon the exhibition of mercury.

In the No. of the American Journal of the Medical Sciences for November, 1829, four cases are given by Dr. Samuel Webber, of Charlestown, N. H., the last of which is almost a precise history of the one which I have recently been called to witness. I regret that Dr. W. did not state whether or not his patient (a little girl ten years old) had taken any preparation of mercury during the typhoid state. A number of cases of a similar

character have occurred in this city within a few years, but so far as I have been able to ascertain, mercury had been previously administered.

It is important to collect as many facts in relation to this disease as possible: it is therefore desirable that those who may have an opportunity of witnessing its symptoms, should communicate such information as they possess, that the disease may be properly classed and accurately defined. For myself, I am at a loss whether to consider it an idiopathic or symptomatic disease. Some circumstances in the case which came under my care, incline me to the former opinion, and to view it as a disease *sui generis*,—viz., it commenced after the typhoid symptoms had entirely subsided, during a state of convalescence, after the child had recovered its appetite, and in a measure its strength; at a time when aphthous affections are not expected, and seldom or never occur. The disease, too, both in my patient and that of Dr. Webber, took a marked and definite course, viz., one half of the face, as high up as the eye. In the lips, it is true that it somewhat exceeded its bounds; but in those soft parts it could not be otherwise, as a disease of this description could not accurately divide them, as with a knife. The gangrene pursued the same course in both Dr. W.'s patient and mine, and was confined to the same parts. Is it therefore unreasonable to suppose that, like Hemiplegia and Hemisphagia, it was governed by some prescribed, though inscrutable law of the animal economy, and that the "gangrenous erosion of the face" is a distinct and idiopathic disease?

After writing thus far, I was accidentally informed that the case described by Dr. Webber occurred in a very interesting child, the daughter of a respectable merchant of this city. The father, by my request, wrote to Dr. W. to ascertain whether mercury had been given in the case referred to, or not. Dr. W., in answer to the inquiry, says that he cannot speak with certainty about particulars which had nothing remarkable at the time to impress them on his mind,—that most probably some calomel was administered at the commencement of the fever as a cathartic, this being his usual custom,—and that very possibly calomel might have been subsequently given, in very minute portions, combined with Dover's powder; but not in sufficient quantities, as I infer from his letter, to produce any constitutional effect. He is even doubtful whether calomel was given at all. He further states "that the disease has been known to attack and prove fatal where no calomel, or other preparation of mercury, had been used; and in otherwise favorable states of the constitution, to have amended under the use of it, and seemingly in consequence thereof."

My little patient took but five grains of calomel, combined with an equal quantity of jalap in powder, and this more than four weeks before her death, and nearly three weeks previous to the first appearance of the disease of which she died.

Dr. Webber, in giving a history of his patient's case, has so accurately described that of mine, that I cannot do better than to request

you to copy it verbatim. The variation in regard to treatment was trifling and unimportant. His patient was a little girl of ten years old,—mine was a little girl of four years old. His patient was affected on the left side of the face,—mine on the right. His patient had a troublesome diarrhœa,—mine had not. The teeth of my patient, on the affected side, either fell out, or were all loosened;—he makes no mention of this circumstance, and I am told by the father of the child that it did not take place. Both cases ensued upon typhus; both lived about an equal number of days from the commencement of the local affection; and both "died completely exhausted."

You will, my dear Sir, by reading Dr. Webber's description of his case, and keeping in mind the above circumstances, have a complete and accurate history of the one which I have recently attended.

Yours, very respectfully,

JOHN B. BROWN.

The following is the case referred to by Dr. Brown.

"This happened in September, 1828, in a little girl ten years old. It ensued upon typhus, in which diarrhœa had been a troublesome symptom. About the fourteenth day, when the fever was apparently beginning to abate, she complained of a feeling of soreness and pain in the left cheek, not far from the angle of the mouth. The part was slightly swollen, somewhat hard and reddish, like the commencement of a boil. Volatile liniment with laudanum was applied, and the redness disappeared, though the

swelling continued, being however less hard and rather more diffuse. A day or two after, some aphthæ appeared in the mouth and fauces, for which a gargle of diluted muriatic acid was employed. She complained, however, of the cheek's being hotter and sorer, and the swelling had evidently increased. On the inside of the cheek it protruded in a ridge between the teeth. Lead water was used externally as a constant application, in addition to the occasional use of the liniment above mentioned, and the inside of the mouth was frequently touched with honey acidulated with muriatic acid; small quantities of wine were given, and one-fourth of a grain of sulphate of quinine thrice a day; also small doses of Dover's powder to regulate the bowels, still rather too loose, and to procure sufficient rest. The cheek nevertheless continued to swell, and the breath became very fœtid with the odor before mentioned. The aphthæ nearly disappeared in a day or two, but upon the most prominent part of the internal swelling of the cheek was a kind of flabby pustule or blister, seemingly beneath the whole thickness of the internal integument, which over the swelling was opaque, and of a dirty white color. This broke the same evening, discharging a small quantity of fœtid fluid, and leaving a sloughing appearance of its membranous covering. It was repeatedly touched, during the night and the following day, with a strong preparation of muriatic acid and honey, sufficiently caustic to eorrugate the sloughing membrane, and make it settle down below the level of the surrounding parts. This it was hoped would put a check to the diseased action, and cause the slough to separate. Not-

withstanding, it continued to increase during the subsequent night, and on the next morning had nearly reached the angle of the mouth, which looked dusky, cracked, and approaching to gangrene. An eminent practitioner from a distance met me in consultation this morning, and advised carrot and fermenting poultices with charcoal over the teeth, a small blister externally across the angle of the mouth, and one on the inside of the cheek, of a size sufficient to cover the slough and the surrounding sound edges, while the internal remedies were continued in increased doses. The disease however proceeded with redoubled rapidity. Gangrene in undisguised blackness passed in a few hours across the external blister, and at the same time came through the cheek opposite to the point on the inside first attacked. In spite of the assiduous application of fermenting poultices with charcoal, these spots spread so as to coalesce in the course of the night, and by next morning to involve most of the unattacked portion of the cheek. The case was now deemed hopeless, and dissolution was soon expected. The fœtor being excessive, with a view to lessen it, the part was covered with a cloth wet with a solution of chloride of lime (bleaching powder). This also lessened the rapid spreading of the gangrene so much, that for hours it seemed almost entirely stationary, but did not become wholly so, though it went forward very slowly, till it had covered the whole of the swelling existing at the time of its commencement, reaching almost to the lower eyelid, over the membranous part of the nose on the same side, the septum, two-thirds of the lips, and half of the chin,

including all the cheek to below the under edge of the lower jaw, and backwards nearly to the ear.

"The parts were completely sphacelated, and had nearly separated, when, at the expiration of twelve days from the first appearance of the danger, the little patient died, completely exhausted. All the peculiar symptoms of the fever had subsided long before her death."

SKETCHES OF PERIODICAL LITERATURE.

AMELIORATION OF CLIMATE.

IN the course of some remarks on the climate of the 40th degree, north latitude, published by Dr. Sexton, of Baltimore, in the *American Journal*, are some valuable data on the comparative character of the seasons in this country at different periods during the last century. The three most remarkable changes during this period, according to Dr. S., are the following:—1st. The winds have become more variable. 2. Those from the western quarters have diminished in number. 3. Snow and ice are formed in less quantities, and are less durable, and the temperature of the winters has increased. The first two of these facts is proved by various records and incidental memoranda in the history of the country. The Swedish Professor Kalm, who travelled in North America in 1748 and 1749, kept a register of the winds at Philadelphia, and a few miles to the southward of that city. From this, it appears that the variation of the wind was sometimes limited by three or four points of the compass, for six or seven days in succession; and in some tabular observations of Bartram appended to Kalm's work, the wind is several times marked as blowing in the same

direction for six days, and in one instance, in the month of June, for eleven. The change which has taken place in this respect may be judged of from the fact, that in late tables we may examine the records of five years in succession, without meeting with an instance in which a current from any eighth part of the compass has existed for more than five days together.

It is mentioned by Jefferson, in his *Notes on Virginia*, that the east and south-east breezes had, in 1782, very sensibly advanced into the interior of the country, within the memory of persons then living. But more accurate information on this point may be gained from the valuable observations of the traveller already referred to. In ten months between August, 1748, and June, 1749, Prof. Kalm recorded four hundred and seventeen observations on the course of the wind. Of these, forty-six are marked as north and south. Of the remaining number, three-fourths are winds from the western semicircle, and but one-fourth, or ninety-eight, from the eastern. At the present time, Dr. S. remarks that the number of easterly and westerly winds, during a year, is nearly equal.

The existing testimony in regard to the increasing mildness of winter during the period referred to, is not less conclusive. For many years from the discovery of this country, the annual season during which the earth was partly or wholly covered with snow, in the latitude of 40 deg., was three or four months. Forty or fifty years since, the usual depth of snow during the winter was estimated by Rush at from six to nine inches, occasionally increased to two and three feet. In the year 1740, the Delaware was crossed with sleighs at Philadelphia, on the 16th of March, and in 1779-1780; was frozen across at the same place for nearly three months. Messrs. Mason and Dixon, while engaged in making astronomical observations about thirty miles west of Philadelphia, in 1767, saw the mercury in the open air fall to 22 deg. below zero. In the winter of 1783-1784, the snow lay, in the south-east part of Pennsylvania, from two to three feet deep during most of the season; and the rivers, which were frozen in December, continued bound, except a short interval in January, until the middle of March.

If with these facts, and many similar ones which might be adduced, are compared the records of modern winters in the same latitude, the change which has taken place in the severity of this season will at once be obvious. Nor is this amelioration at all more remarkable in the region described by Dr. S., than in that which is found two or three degrees farther north. So far as we have documents to judge from, our own climate has been undergoing a

similar alteration, to a nearly or quite equal extent. Men of scarcely more than middle age recollect the period when the sleighing continued good in the neighborhood of this city for three months in the year; while storms which covered the earth with snow to the depth of three or four feet, were affairs of frequent occurrence. Analogous facts are on record with regard to many of the countries of the old world. In our own country at least, we find a plausible explanation of these changes, in the destruction of her forests, and the increased cultivation of her soil. The uniformity of the atmospheric currents has been lessened by varying the character of the surface over which they blow; and the keenness which they formerly derived from passing over tracts of woodland, covered with almost eternal snow, is no longer to be felt. Still, as our author remarks, a continuance of these north-western breezes sometimes produces a temperature worthy of the days of our ancestors; and we are yet to wait for great improvements in our neighbors of the hyperborean regions, before the airy messengers they send us will, instead of bearing the snow and hail on their pinions, ripen our grapes and our olives, and breathe on us a perennial spring.

SARCOCELE.

AN interesting case of this disease is related in the London Med. and Phys. Journal for October. The patient was twenty-six years of age, had previously enjoyed good health, and had not been affected with go-

norrhœa for many years. Without any assignable cause, a swelling manifested itself in one of the testicles. This continued to increase, notwithstanding the employment of the usual remedies, until at length its extirpation was found necessary, and was performed. From this time the patient enjoyed good health for four months. At the end of this period, he felt some uneasiness in the remaining testicle. On examination, the organ was found enlarged, hard, and tender to the touch. Various local applications and general treatment were employed, but with little effect. The disease proceeded until the testicle attained four times its natural size, with an aggravation of all the other symptoms. At this period Mr. Guthrie was consulted, and recommended, in addition to the treatment already employed, the use of a large-sized metallic bougie, to be passed three times a day, and kept in the urethra for several minutes. This produced at first considerable irritation, and even hemorrhage. In the course of a fortnight, however, both the size and the tenderness of the testicle diminished. After three months use of the bougie, every symptom of disease subsided, and the patient could take active exercise without the least uneasiness.

The theory on which this mode of practice has been proposed in this disease, and which is maintained by the author of the article referred to, is that of its removing a morbid irritability of the urethra, usually connected with the complaint. Nothing is said, however, to show that such a state of the passage existed in the

case referred to; and we are inclined to think that this is not generally or even frequently the proximate cause. Where orchitis occurs as a sequel of gonorrhœa, it is not too much to presume a transfer of inflammation from the urethra to the testicle; and undoubtedly one of the remedies indicated under these circumstances, is the irritation of the urinary passage with a bougie. The primary effect of this measure, however, is not to diminish the sensibility of the urethra, but to increase it; as is evident from the strangury which ensues upon its use. On the whole, therefore, we should be more disposed to attribute the cure obtained in this and similar cases, to a temporary transfer of the disease, somewhat analogous to what takes place under the use of vesication in common inflammation. It seems not very improbable, that in cases which yield to the use of the bougie, as above described, the local stimulus derived from copaiba or cantharides taken internally, might be of equal advantage.

NITRATE OF SILVER IN UTERINE DISEASE.

A MR. JEWELL, of London, has lately published some cases of the successful use of lunar caustic in vaginal discharges proceeding from a diseased state of the cervix uteri. He thinks this a more frequent cause of the morbid discharge generally recognized as leucorrhœa, than has been commonly supposed. Admitting this observation to be correct, we should hardly expect the treat-

ment suggested to be useful in any considerable proportion of the cases of leucorrhœa met with in practice. That this disease sometimes proceeds from active inflammation in the cervix uteri, there is no doubt; but the symptoms in such cases would certainly be so far peculiar, as to induce a practitioner of ordinary prudence to examine and ascertain the fact. He who should infer the existence

of such inflammation from the discharge itself, and on this ground employ local stimulants to subdue it, would in many cases aggravate, instead of relieving the disease, and would soon make shipwreck of his own reputation.—So far as Mr. J.'s remarks go to show the necessity of careful examination in suspected cases, we deem them highly valuable and important.

BOSTON, TUESDAY, DECEMBER 8, 1829.

LOCAL APPLICATION OF NITRATE OF SILVER.

MR. HIGGINBOTTOM, of Nottingham, whose name will ever be associated with lunar caustic, has published another edition of his work on the curative powers of this remedy. Even abating much for the zeal of a man engaged on a favorite topic, the incontrovertible practical evidence of the influence of the Nitrate of Silver in restraining inflammatory action, adduced in this volume, is exceedingly valuable, and places the remedy in a much higher place than it has hitherto held in our materia medica.

Proofs very satisfactory are brought by Mr. Higginbottom, of its use in phlegmonous and erysipelatous inflammation, in bruised wounds, ulcers, and in burns and scalds. His mode of applying it is generally, first to wash the part clean with soap and water, and wipe it dry. The diseased surface, and from half to a whole inch of the surrounding healthy skin, is then to be moistened, and a stick of the caustic drawn over it once twice, or oftener, according to

the object to be effected. If the disease be superficial, and only a blackening of the surface is desired, once will be sufficient; if vesication is to be produced, the operation should be repeated several times; and if an eschar, a still longer application will be necessary. It is a point of the greatest importance, to carry the effects of the caustic beyond the diseased surface. No dressing is found necessary, the deadened cuticle being a sufficient protection to the part. Mr. H. is of opinion that by the free application of this remedy over a tumor in which suppuration has already taken place, a degree of absorption of the pus may be produced; and in bruised wounds and burns, he has uniformly succeeded in preventing, by this mode of treatment, the sloughing of the parts,—their integrity being preserved by the peculiar and specific tendency of this remedy to promote the *adhesive* process. Even wounds to be healed by the first intention will progress more certainly and rapidly, by blackening the surrounding

skin; and punctured wounds heal under the influence of this remedy, without supuration.

In local *erythema*, we have found the free and early application of Nitrate of Silver, so as to blacken the skin, uniformly successful in arresting the progress of, and subduing the inflammation. In several species of *Herpes*, it has operated with great expedition, and to our entire satisfaction. A case of *Burn* is reported, as having been very successfully treated by this application so as to form an adherent eschar, at St. Bartholomew's Hospital; and in another case, of the *bite of a cat*, at the same Hospital, it was immediately curative, applied in the same way. A wound received in dissection is reported in a British Journal as having been entirely cured by the same process.—All these cases are entirely independent of the authority of Mr. Higginbottom. We might go on to adduce further evidence of the value of the researches of this gentleman, but enough we trust has already been said, to induce the profession to turn a greater degree of attention to this subject than it seems generally to receive.

ROBBERY OF A TOMB.

ANOTHER step has been taken toward that horrid catastrophe to which we are fast hastening. The great amount of human dissection constantly going on in this city and commonwealth, both by private anatomists and in our Schools of Medicine, creates every year an increasing demand for subjects. Heretofore, this demand has been met by bodies taken from

the grave, in the stillness of the night,—a fact most disgraceful to that public which has established schools of anatomy, and refused to provide the means of pursuing its study,—which requires of the Practitioner a minute knowledge of the structure of the body, and denies him the possible means of acquiring this knowledge in an open and honorable manner.

In urging the necessity of legislation on this subject, we have repeatedly said that as the demand for bodies increases and the price of them is enhanced, and the temptation offered to the resurrectionist to get them at all hazards magnified, he will become bolder and bolder in his vocation, and soon the poor man will be afraid to live in a retired alley, and the rich will fear to carry the comforts of life to the needy sick, lest darkness, and with it an untimely end, should await him. And well he may, for all this *has* happened, and the course of events here is in a train precisely similar to that which led to the recent scenes of horror at Edinburgh.

One step more has now been taken toward this dreaded communication. The *Tomb*,—the cavern of stone closed by fast bolts of iron,—has been entered in the night, and the corpse which had just been deposited, stolen from its supposed resting-place! The next step is *easier* than this! and unless some measures are speedily adopted to supply *proper* subjects for dissection, and of these there might be obtained a great abundance, no man will be safe, we do not say in his grave, but in his visits

to the sick poor, or in his own house, if it is far from that of his neighbor.

Cancer of the Uterus cured by Injections of Hydrocyanic Acid.—

A case of this nature was reported by Dr. Bruni to the Medico-Physical Society of Florence, at one of its sittings in March. The injections were made four times a day. The acid was prepared agreeably to the process of Scheele, and four denarii were mixed with four pints of barley water. Cicuta and aloes were administered internally. During the first few days, the injections caused sharp cutting pains of the severest kind; but the patient having passed by the vulva fragments of a membranous and fleshy substance, her pains became from that time less severe: she regained her strength and flesh to such a degree, that in six months there was not a vestige of disease of the uterus. The menses returned at regular intervals.—*Med. & Phys. J.*

Remarkable Case of Cataract.—

A Swedish Journal (*Arsberättelse om svenska lakare sällskapets arbeten*) contains the following fact, communicated by Dr. Wendelstrom:—

A robust peasant, æt. sixty, who had always had excellent sight, and who had only suffered from slight gouty attacks, being occupied in cutting wood in a forest, suddenly felt that his vision was obscure. In a few hours he was completely blind, and he was obliged to be led home. He complained of no pain, nor were there any appearances of external inflammation. When he was examined by Dr. W. a few days afterwards, it was found that both eyes were affected with cataract. The operation of extraction was afterwards performed.

Polydipsia cured by Camphor.—

Dr. Allert, of Bromberg, relates an instance of excessive thirst which occurred in a female. Notwithstanding the incredible quantity of cold water drank by the patient, the thirst was not in the least abated. Her tongue was red, and her feet began to exhibit appearances of œdema. The cause of the affection could not be determined. After the employment of many ineffectual remedies, the patient was finally speedily and fully cured by the exhibition of large doses of camphor.—*Journ. der Practischen Heilkunde.*

WEEKLY REPORT OF DEATHS IN BOSTON, ENDING NOVEMBER 26.

Date.	Sex.	Age.	Disease.	Date.	Sex.	Age.	Disease.
Nov. 20.	F.	9 mo	mortification	F.	4		croup
	M.	15 yrs	bilious fever	F.	74		old age
	M.	30	consumption	M.	3		croup
	F.	2 mo	stoppage in the bowels	M.	6		scrofula
21.	F.	46 yrs	lung fever	M.	4		lung fever
	F.	12 mo	do.	24.	M.	15 mo	do.
	M.		drowned		M.	38 yrs	consumption
	F.	5 d	convulsions		F.	43	do.
	F.	6 yrs	inflammation on the lungs		M.	19	bleeding at the lungs
	F.	86	old age	25.	F.	39	drowned
22.	F.	5 w	infantile		M.	21	consumption
23.	F.	29 yrs	typhous fever		F.	40	do.
	F.	46			M.	18 mo	inflammation on the lungs
	M.	38	dropsy on the brain	26.	M.	2 yrs	cholera infantum
	F.	24	consumption	Males, 13—Females, 16. Stillborn, 2.			Total, 31.

ADVERTISEMENTS.

MEMORIA MEDICA.

THIS day published by CARTER & HENDEE, corner of Washington and School Streets, *Memoria Medica*,—a Medical Common-place Book,—with an alphabetical Index of the most common terms occurring in practice. Carefully selected and arranged by a Fellow of the Massachusetts Medical Society.

From Dr. James Jackson, Professor of the Theory and Practice of Medicine in Harvard University.

Gentlemen,—I have examined the "*Memoria Medica*" which you sent to me. I think the plan of it very excellent, and that it will be found highly useful to practitioners and students of medicine. I have never believed that a voluminous common-place book can be very beneficial to any man, unless he means to become an author. But on the other hand, every one will find an advantage in keeping a common-place book in which he may notice the detached facts which come under his notice, and which are likely soon to be lost from his memory. The book you have prepared will be found well adapted for this purpose by medical men, and will be more likely to be used by those who procure it than a common blank book, because all the labor of arrangement is saved.

I am, gentlemen, your obedient servant,
JAMES JACKSON.

From Dr. Walter Channing, Professor of Obstetrics and Medical Jurisprudence in Harvard University.

I have examined the Medical Common-place Book which was left with your note this evening, and with pleasure offer you my thanks for the publication of so useful a volume. Every practitioner of medicine will agree with the remarks in the preface on the inconveniences and absolute loss of what is very useful, which result from depending solely on the memory. Not unfrequently it happens that some particular prescription is peculiarly suited to an individual. Some time passes, and an occasion again arises in which we believe that the same medicine might be equally beneficial; what it was, however, has wholly escaped us; and though something else may be equally useful, still some regret may be felt, at least by the patient,

that what has been found beneficial cannot again be at once resorted to. Some object to an artificial method of preserving, for such and other uses, what may be safely trusted to the memory, if that faculty be faithfully cultivated. I am willing to admit that there is force in this objection; but it is a simple question of fact only we have to consider. If it be true that there is much lost to the individual, and certainly much more to the profession, by trusting entirely to the memory, the occasional use of the Common-place Book for the preservation of what is truly valuable, has all the recommendation it needs. For such purposes, viz., for the registering of cases the most rare, and the frequent, if important, epidemics, prescriptions, &c., your *Memoria Medica* promises to be very useful; and for these it well deserves to be recommended to physicians. Students attending hospital practice will find it very valuable. Its tables of names are very full, and under references very easy. I cannot but hope it will get into general use.

Yours, &c., W. CHANNING.
Dec. 6.

NEW BOOKS.

CARTER & HENDEE have just published and for sale—

A Manual of *Materia Medica*, and Pharmacy, comprising a concise description of the articles used in medicine; their physical and chemical properties, &c. &c. By H. M. Edwards, M.D. and P. Vasseur, M.D. Translated from the French, with additions, &c. by Joseph Tongo and E. Durand.

Examinations in Anatomy, Physiology, Practice of Physic, Surgery, Chemistry, *Materia Medica* and Pharmacy, for the use of students. By Robert Hooper, M.D. from the last London edition, with upwards of one hundred additional questions, and an entire new chapter on Poisons.

The American Journal of the Medical Sciences, No. 11, for November, 1829.
Nov. 24.

A TREATISE on the Scrofulous Disease, by C. G. HUFELAND, Physician to the King of Prussia, &c., translated from the French of M. Bousquet, by Charles D. Meigs, M.D., is just received and for sale by CARTER & HENDEE.
Sept. 8.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

THE BOSTON

MEDICAL AND SURGICAL JOURNAL.

Vol. II.]

TUESDAY, DECEMBER 15, 1839.

[No. 44.]

I.

SUCCESSFUL MODE OF TREATING FISTULA OF THE PAROTID DUCT.

A SALIVARY fistula is neither a very pleasant nor tractable complaint, and any mode of treatment which shall prove more successful than those in common use, will undoubtedly be a boon to surgery and surgeons. We have no intention of entering into prolix details respecting fistulæ of the duct of the parotid gland, or duct of Steno, as it is usually termed; we would simply remark that it is rarely met with, and is one of the most obstinate of the salivary fistulæ. When it opens within the mouth, through the mucous membrane lining the cheek, it can scarcely be called a disease, as the fluid in that case is discharged, though not by its original route, into its natural receptacle. But when the opening is situated externally, and the saliva, instead of reaching the mouth, dribbles down the cheek, a train of inconveniences arises, which finally fall under the cognizance of the surgeon, and which it is his interest and business to remedy, if he can. The following case, which occurred in the private practice of M. Roux, will show that eminent operator's methodus operandi.

M. Auguste Godin, a notary at Neuvy, was loading a fowling-

piece, when his powder-flask exploded, and one of the fragments produced a wound in the right cheek. The wound was both deep and wide, and being in the situation of the parotid duct, great pains were taken to procure union by the first intention. Much inflammation, however, succeeded, and the above object was but partially accomplished; suppuration succeeded, and, along with the pus, saliva flowed in considerable quantity. It was now quite obvious that a salivary fistula was established. Cauterization of the edges of the ulcer, and afterwards compression, were employed, but they failed in effecting a cure, and, two months after the accident, M. Godin repaired to Paris, and consulted M. Roux. The fistulous opening evidently communicated with the duct of Steno, and not with the substance of the parotid gland. On introducing an Anel's probe through the natural orifice of the duct, on the inside of the cheek, it was stopped, after a course of about half an inch, by what appeared to be an obliteration of the canal; and the same thing took place on attempting to pass the probe from the fistulous opening without.

Finding that the cavity of the duct was obliterated between the fistula and the orifice in the mouth, M. Roux was convinced that neither the caustic, nor compression,

nor any other similar proceeding could avail, unless a route into the mouth were made for the saliva. M. Roux accordingly proceeded to an operation for that purpose, and first of all exposed the bottom of the fistula, by excising a portion of diseased skin which surrounded the external opening. The next step consisted in making two successive perforations of the cheek, from without inwards, by a hydrocele trocar, taking care to avoid the gum. The openings were made on a horizontal line, and a quarter of an inch distant from each other; the one corresponded directly with the bottom of the fistula, exactly opposite the external opening,—the other was nearer the parotid gland, and close to the anterior border of the masseter muscle. A small seton, composed of silk threads, was then passed through both openings, and the ends tied loosely in a knot, and retained on the outside of the cheek.

A good deal of swelling and inflammation of the cheek succeeded, but were quickly subdued by local applications. A superficial abscess, however, formed close to the parotid gland, and communicated with the wound which had been made in the operation. It was freely opened, and the skin, or rather the old cicatrix over it, was removed, so that the two wounds were laid into one. The saliva continued for some time to flow, in part externally, and in part by the openings into the mouth. Light dressings and gentle compression were employed, and the seton-threads were frequently moved backwards and forwards, in order to render the perforations completely fistulous. At one time strong compression was made on the external wound, but it brought

on a return of inflammation, which extended to the parotid gland itself; it was therefore abandoned. Six weeks after the performance of the operation, the saliva all at once ceased to flow from the wound, which rapidly cicatrized, and soon afterwards the silk thread came away spontaneously. M. G. stopped some time longer in Paris, and the cicatrix which ensued proved to be smooth, regular, and unaccompanied with any appreciable deformity. On the internal membrane of the cheek a transverse sulcus, with slightly elevated margins, could be felt, from which the saliva flowed into the mouth.

We have thought it right to publish the heads of the case, because they display the practice of M. Roux in this troublesome disease. That it ultimately succeeded there cannot be a doubt, but that some other method would not have done as well, perhaps there may. We do not clearly perceive the necessity for establishing two perforations in the mucous membrane of the cheek; indeed, we are convinced that one, of sufficiently ample dimensions, would be simpler and better. The seton thread passed through the two openings, and, including a portion of intervening soft parts, must frequently cut through that portion by ulceration, and lay the openings into one at last; or, at all events, if even they remain distinct, the two can answer no useful purpose, that would not be equally or better answered by a single one. This however is a trifle, and does not affect the principle of the operation, viz., the establishment of an artificial route for the saliva into the mouth. If this be the indication, as it certainly is, it must matter little how the minor steps

of the operation that fulfils it are conducted.—*Jour. Hebdomadaire.*

II.

FRACTURE OF BONES FROM TRIFLING VIOLENCE IN CASES OF CANCER.

MR. SALTER, a Surgeon of Poole, Dorset, has published two cases of fracture of the thigh that occurred almost spontaneously in patients affected with cancer of the breast. We shall only notice the second case, as in that, examination of the limb, post-mortem, was permitted.

Mrs. Pringle, in October, 1823, had the left breast removed in Guy's Hospital, by Sir Astley Cooper, for scirrhus tumor, but in January, 1824, the disease returned in the cicatrix. In the succeeding July, whilst raising the right thigh in the attempt to get into a cart, the thigh bone broke, about three inches below the trochanter major, with an audible snap, and on the 19th of October the patient died. She was 56 years of age, and had long complained of slight rheumatic pains in the affected limb, which, for about five months prior to the accident, had been converted into violent pain extending from the hip joint to the knee, and appearing deep-seated, as if in the bone. The pain was worse at night, had produced great lameness, and the muscles of the thigh were extremely shrunk. The increase of pain alluded to, she attributed to striking her foot against one of the stairs. A little above the patella, in front of the limb, there had been for some time a slight tumefaction, tender, upon pressure, and depending, it would seem, on thickening of the periosteum. These are the important features of the case,

and we proceed to the appearances found on dissection.

The muscles of the thigh were pale and shrunk ;—a bloody fluid escaped from the capsular ligament of the knee joint ;—two or three small clots of blood were contained in the articular cavity ;—and, on removing the patella, an ulcer, about the size of a finger nail, was discovered in the upper and external part of its articulating surface. The head of the femur had lost its wonted smooth cartilaginous polish, but was rough and softened in its centre, whilst the thigh bone itself was so soft that a knife could easily be pushed through it, and could readily be bent in any direction, about three inches from either extremity. It was at the upper part of this portion that the fracture had taken place, though the precise point would be difficult to determine, as there seemed to be no entire separation, as occurs in common fractures. The distortion of the limb did not arise from any overlapping, but resulted from a bending of the bone produced by the contraction of the muscles. Those in immediate contact with the trochanters and the upper half of the limb were blended together into an uniform mass, firm and semicartilaginous, of pale red color, with bony spiculæ thickly dispersed through it, and puriform matter slightly tinged with blood. Corresponding to the swelling above the patella, the tendon of the cruræus was much thickened and altered in structure ; pus issued from beneath it ; and the periosteum was also greatly thickened, and readily separated from the bone. The table of the thigh bone at this part was almost en-

tirely absorbed quite down to the condyles ; the medullary cavity was filled with a bloody pul-taceous substance ; and indeed so great was the disorganization, that the author abandons the task of endeavoring to describe it in words, and refers to two drawings made by his pupil, Mr. Bul-lar, and engraved on stone for the volume of the Transactions which contains the paper.

Mr. Salter, in the remarks he has appended to the case, seems not to be aware that the connexion between cancer and this curious condition of the osseous system has been frequently pointed out by authors on surgery. He observes that Mr. Samuel Cooper is the only author to whose works he has access, in which this disease has been noticed. We can assure Mr. Salter that no less a person than Mr. Cooper's celebrated namesake, Sir Astley, has particularly adverted to the fact in his public Lectures on Surgery, and mentions, if we remember right, the case of a lady whose thigh bone broke, on merely attempting to turn in her bed. We could cite several other authors to establish the correctness of our statement, but really we believe that the occurrence of a morbid state of the bones, in many cases of cancer, is too well known to require any labored disquisition to prove it so. It was but in a very recent number of this Journal that we translated a case from the French, in which the bones of a patient who had died of cancer, fractured in every direction, as the persons engaged in that office were putting her into the coffin. We are not aware, however, that many accurate dissections of the diseased bone, such

as that given to his brethren by Mr. Salter, are met with in works of common circulation, and therefore we have been induced to notice it so fully here. Mr. S. deserves credit for his zeal in laying before the profession what he conceived to be a fact not generally known.—*Medico-Chirurgical Review.*

III.

CANCER OF THE UTERUS.

SIR,—There is no organic disease attended with such excruciating and appalling symptoms as the complaint on which I am now addressing you. When we consider that it is one of the most distressing maladies to which the female part of the community is liable ; when we reflect on the agonizing torture it inflicts on these objects of our tender care and solicitude ; when we view them bereaved of every hope, and a prey to misery and despair ; and when we contemplate how sedulously they are wont to console us in our sorrows, ready and ever willing to pour the balm of comfort into our hearts, and to soothe the language of affliction whenever we stand in need of their sympathizing sorrow, and likewise how largely we are indebted to them for the greater part of the comfort and happiness we enjoy ; it cannot but excite in us, who study humanity as well as physic, a more than ordinary zeal to relieve them from the accumulated ills which this disease entails upon them. I have long observed, but not without painful emotions of commiseration, that this distressing complaint,

having hitherto been looked upon as incurable, has not had that attention devoted to it which it deserves; the means that have heretofore been adopted for its relief having been merely palliative. I am fully convinced that in its commencement, before considerable structural derangement be produced, much may be done to obviate it, and after ulceration has taken place, much more remains to be done than has been generally attempted. Now this is one of these diseases for which the whole artillery of three branches of the profession is more essentially necessary to be called into action than any other. In this case, the profession being constituted as it is, possibly may account why so much apathy exists respecting it, and so little has hitherto been done for its removal. As far as my investigations and experience go, it is very gratifying to my feelings to say that this disease is much more under the influence and control of medical assistance, when properly combined with surgical aid, than the generality of the profession are inclined to believe. The symptoms in different patients are so variously modified, that no universal plan can be made applicable to all cases. In its early stage, I have been in the habit of prescribing the tincture of iodine, with an appropriate dose of the solution of the acetate of morphine, night and morning, just sufficient to subdue irritation, using at the same time the warm hip-bath with a small portion of bay salt dissolved in it; and I have been pleased in observing that this plan, in this state of the disease, has been capable of effecting a complete removal of it. In

the more advanced period of the disorder, in addition to what has been previously proposed, I have been compelled to adopt more active means; sometimes I have used injections of extract of lead and elder-flower water, sometimes infusion of digitalis with the superacetate of lead, at other times the decoction of dulcamara with the muriate of ammonia, and where there is much pain, infusions of opium with the acetate of zinc, selecting one or the other, and regulating the strength of the medicine as the case and symptoms may seem to require. In administering these injections, it must be observed that, to be advantageously used, they must be exhibited differently from the mode usually pursued. They must be applied more like ablutions than injections, not with the common syringe, but with an apparatus properly adapted for the intention internally. I have ordered different preparations of iron with decided benefit, and I have sometimes prescribed the liquor arsenicalis with the tincture of henbane. I have also given the fucus helminthocorton with advantage, and this last medicine has been, by my suggestion, exhibited by my worthy friend Mr. Philip Marshall, of Shepton Mallet, to a patient laboring under this distressing affliction, which effected a complete cure. I can with great truth assert that this method, if properly persevered in, even in its more advanced stage, will make the patient not only comfortable, but tend to prevent the progress of diseased action. In the last and most dreadful stage of all, when the afflicted sufferer is deprived of almost every hope,—when, by its

progressive continuance, the uterus has become much increased in size, and the ulcerative process has taken place, accompanied with the most aggravated and distressing symptoms,—here, even here, much more may be done effectually to relieve the complaint, than has generally been contemplated. In this untoward situation, I recommend suppositories of morphine and cicuta, to be applied up the vagina to the uterus, and likewise suppositories of belladonna; but those with the belladonna must be very cautiously exhibited by the vagina to the ulcerated surface; they may, however, be safely applied by the anus: and here I must beg leave to call your attention to an application from which I have found more essential benefit,—which is the oil of tin. Lint moistened in it, and applied by the vagina to the diseased part, I have found a very sedative and soothing application, and I am inclined to think it has a specific power in this disease: by its application alone, I have cured an ulcerated cancer of the breast: by its employment, the pain gradually ceased, the diseased part became more and more exposed, and at last completely sloughed away; healthy granulations succeeded, and the wound healed without any difficulty. If this medicine should not answer the end proposed, the ablutions, with the injunctions previously recommended, should be used, with such quantity of the solution of the acetate of morphine, as is sufficient to alleviate the urgency of the pain: if the discharge should be profuse, instead of these injections, I use the decoction of oak bark and tincture of myrrh; and

if it should be offensive, a solution of the chlorate of soda in a strong emulsion of bitter almonds, with the morphine; giving internally the infusion of the fucus helminthocorton, and keeping up the strength of the patient by bark and other appropriate medicines, attending at the same time, in the several stages of the disease, to the state of the stomach and chylipoietic viscera.

I have thus described some of the general remedies which I have been in the habit of exhibiting with advantage in this disease. I shall make no apology for the length of this communication, the nature of its object being such as entitles it to our best consideration. Callous and insensible must we be to the finer feelings of humanity, if we were not more than ardently solicitous in arresting the progress of the insidious ravages of this malignant complaint, and in exerting our utmost efforts in averting the arrows of death from the seat of life.

I am, Sir, your obedient and
very humble servant,

JOHN TUSON.

Gazette of Health.

IV.

DIABETES.

DR. CHALMERS, an eminent physician of Hull, has published an interesting case of diabetes, in which the hydrosulphuret of ammonia (lately noticed by us as a remedy for the disease) was successfully administered under his direction at the General Infirmary of Kingston-upon-Hull. The patient (a male) about thirty-six years of age, had been for some time a laborer in a fenny part of

Lincolnshire. At the time of being admitted into the institution, he passed saccharine urine to the extent of twenty-eight pints daily, and was affected with the characteristic symptoms of the malady, as excessive thirst, dry and rough skin, wasting of the body, voracious appetite, constipation, &c. The Doctor ordered a warm bath, cupping over the loins, fifteen grains of Dover's powder with two of calomel, to be taken at bed time, and a drachm of compound jalap powder the following morning, with the common diet of the hospital. This treatment having failed to produce any beneficial effect, the Doctor directed a quarter of a grain of emetic tartar, dissolved in an ounce of water, to be taken every second hour, a grain of opium at bed time, a pint of lime water with an equal quantity of milk daily, and the loins to be rubbed twice a day with the ointment of tartarized antimony. The symptoms continuing unabated after this treatment had been adopted four days, the Doctor prescribed the following mixture :—

Take of Hydrosulphuret of Ammonia, 30 drops ;
Puro Water, 6 oz. Mix.

A sixth part to be taken three times a day. To have animal food twice a day.

After continuing the mixture two days, the quantity of urine was reduced to twenty pints in the course of twenty-four hours. To keep up a regular state of the bowels, the Doctor ordered a pill, compounded of calomel, two grains ; bitter apple, four grains ; and croton oil, one drop :—to be taken occasionally. After persisting in the use of these reme-

dies a fortnight, the quantity of the hydrosulphuret of ammonia in the mixture was increased to twenty drops. The warm bath was sometimes employed. During this treatment, the quantity of the urine and the other symptoms gradually abated ; and in the course of six weeks, when he was much more active in his habits, the healthy function of the skin was restored, the appetite and thirst nearly natural, and the quantity of urine, which was less, reduced to seven pints daily, and less saccharine. At this time, when there was every reasonable hope of a favorable termination of the case, he was dismissed the hospital for irregularity.—*Ib.*

V.

ULCERATED CANCER, CURED.

By GEO. FIELDING, M.D.

Mrs. C——, æt. 81, June 1st, 1829.—She informs me that, for upwards of fifteen years, she has had a complaint in the right mamma. Without any known cause, she first discovered a small tumor within the breast, near the nipple ; it very slowly and gradually enlarged, retracted the nipple, and puckered the integuments ; she had not constant, but occasional severe darting pains ; these most commonly came on in the night, when they awoke her from sleep. She has been several times ill during this period, and has had medical advice, but did not mention the complaint in her breast. About five weeks ago she slipped and fell, in the house ; hurt her right hip, and “shook” herself a good deal. Soon afterwards, the breast began to give more pain, and distressed her so much that

she was induced to show it to the attending physician and surgeon, who have prescribed up to the present period. For some time previous to the accident, cracks and small openings formed in the integuments, which discharged a thin bloody fluid. There is now an ulceration extending from the outer edge of the pectoral muscle within the axilla, towards the inner edge,—say about four inches in length, and from an inch to two inches in breadth. The broadest part is about the situation of the nipple, of which there is not a vestige remaining. The ulcer here is a very deep excavation, as if the whole middle part of the gland had sloughed away. The edges of this extensive ulcer are ragged and irregular, in some places hanging over, and in others everted; a lurid blush of different breadths surrounds the whole of the edges, but I discover no disease in the neighboring lymphatics. The general aspect of the ulcer is of a foul ash color, except at the outer edge of the pectoral muscle, where there are a few red points. From the state of the cloths removed, the discharge from it, which is thin and pale, must be very considerable, and has the peculiar fœtid odor of this kind of ulcer. The odor is distinguishable on the stair-case, long before entering the room, notwithstanding great pains have evidently been taken to obviate it. Countenance pale and bombycynous; tongue clean; pulse very little above the natural standard. Complaints of restless, feverish nights. Bowels are kept regular. The old lady says the dreadful smell deprives her very much of appetite, as everything she takes is

offensive to her. Her friends were told that the case was nearly hopeless; that all that could be promised was to soothe her, and counteract the horrible fœtor, which was as distressing to her attendants as to herself. I directed the carpet to be removed, a mild diet, some common febrifuge, and the following:—

* R. Coniæ, gr. vi.
Ext. Conii. gr. xxiv. M. div.
in pilul. xij. s. pil. ij. om.
nocte.

R. Solut. Chlor. Calcis ʒij.
Aqzæ Fontanæ ʒvi. ft. Lotis.
Lint dipped in the lotion to be
applied over the ulcerated sur-
face, and to be kept constantly
moist.

8th.—Ulcer looks much the same, except at the lower side, where the lurid edge has extended every way. This portion of gland and integument is condemned. Has rested better, and is delighted that the offensive smell is removed by the use of the chlorine.

14th.—The remedies have been continued regularly. The ulcer generally looks cleaner; the edges are not so ragged, but the lower part is in a state of sphacelus, and will drop off. Complaints of restless nights, but is not feverish. A moderate opiate substituted for the conium at night.

22d.—Ulcer looks much cleaner everywhere, except at the lower side; red, healthy granulations in various places, particularly in the axilla, where there is a patch of healthy-looking surface. Sleeps pretty well, and takes sufficient food.

July 2d.—Up to this time the

* How is this prepared?—E. G.

appearance of the ulcer has gone on gradually improving. A small cicatrix has formed in the axilla, and at the edge of the pectoral muscle; the upper edge is much flattened, and the lurid redness has nearly disappeared at that part; throughout, good granulations are arising, except at the lower side, where the gland and integument, nearly an inch in depth, and of considerable extent, are gangrenous; but there is a line of separation formed, which looks pretty healthy. Eats and sleeps well. Opiate continued at night, and the following ordered to be taken in the day:—

R. Tinct. Coninæ ʒiss.*

Aquæ Menthæ ʒvi. s. 6 part.
ter die.

6th.—The mortified portion on the lower side has principally dropped off, leaving a deep and foul excavation, but the corresponding edge of the integument looks healthy. Cicatrization going on from the outer edge all round the upper and inner sides of the ulcer. Sleeps well; general health and appearance improving.

14th.—The whole of the blackened parts are removed, and healthy granulations are now fast filling up the cavity, the lower edge approximating them being much flattened. In every other part of the ulcer, cicatrization is proceeding rapidly.

Aug. 4th.—In a few days after the last report, the inferior edge of the ulcer, and the granulations from its base, approximated, and cicatrization went on rapidly all around. There is now only an ulcer, about the size of a half-

crown, in the middle. The general health and appearance are much improved; walks from room to room, and is free from complaint, except a little dyspnoea, which she says has come on the last two or three nights, upon lying down. It was my intention to establish an issue, provided the ulcer went on healing, before complete cicatrization took place; and, upon inquiry, I learnt that she had an issue made about "a certain age," which she healed up many years ago. For the relief of the dyspnoea, a blister was put upon the left side of the chest, and an issue placed in the right arm. Omit the opiate, and continue the conine.

18th.—By these means the dyspnoea was removed in two or three days. The ulcer is now entirely healed, and the cicatrix has a healthy, natural appearance, free from crust or deposition. The old lady seems in good health for her years,—having entered her eighty-second year about a month ago. Throughout the whole of the process of sloughing, the lotion prevented all fœtor, and, as it gave not the slightest pain, was continued until the whole was cicatrized.

Several times during the cure, a slight erythema appeared upon the surrounding sound skin, which was always speedily checked by the application of warm brandy.—*London Medical Gazette.*

VI.

STRANGURY.

DR. JOHN DAVY, of Zante, recommends a small catheter to be introduced into the bladder in cases of strangury from blister plaster, or from canthari-

* The tincture we use contains four grains to one drachm of spirit.

des taken internally. "This treatment," says he, "I have found almost constantly to succeed, not with the view of drawing off the urine, but for the purpose of distending the urethra,

particularly the prostatic portion." The tincture of belladonna rubbed over the perineum with warm fomentations, speedily terminates the most violent attacks of this malady.

SKETCHES OF PERIODICAL LITERATURE.

MESMERISM.

DR. CHENEVIX has published, in the London Med. and Phys. Journal for October, his fifth and last article on Mesmerism. It contains an account of trials of this agent on eleven persons, all of them females, and affected with various diseases. These cases are peculiarly interesting, from the minutes of the phenomena having been taken by Dr. Elliotson, who was an eyewitness, and who appears to have drawn up his statement with great care and accuracy. On ten of the number, no effect was produced except that of sleep, which took place in two or three at variable periods, and may be accounted for, from the circumstances present, without difficulty. The last case is more remarkable; and as,—considering the reputation of the narrator, and his freedom from prejudice,—it contains the strongest testimony to the efficacy of Mesmerism which Dr. C. has published, we shall present it to our readers without abridgment.

"A fourth patient was now seated in the chair. She exhibited no apprehension of any kind, but was talking very cheerfully to me. Mr. C., without saying one word to her, began his manipulations, at the distance of half a foot, but did not touch her. In about one minute she said,

in a plaintive voice, 'Sir, don't do that;' and seemed in great distress. She afterwards told us that Mr. C. drew weakness into her, and made her feel faint. She complained of pain in her abdomen. Mr. C. moved his hands transversely before it, and she said the pain was gone. (She had felt a slight pain there before we saw her.) She then complained of great uneasiness in her chest; and after some transverse movements made by Mr. C. with the intention of removing it, she declared it was gone. The pain in the abdomen returned and ceased, as before, by the manipulations of Mr. C.—Mr. C. then darted his open hand towards one arm, without touching it, and told her to raise both arms. She scarcely could move that which he had thus mesmerized. He then made some transverse passes before it: she at once moved it, and declared the stiffness and uneasiness to be gone. The same was repeated with the other arm, and with the same effect. He told her to lift her feet: she did so with perfect ease. He then darted his hand toward one leg, and she stared with astonishment at finding that she could not stir it without the greatest difficulty. He then made some transverse passes, when she instantly raised it, and said there was neither pain nor stiffness in it. He then closed her eyes, and put a very small piece of paper, weighing perhaps one grain, on her foot, in such manner that it was utterly impossible she could perceive it: she could scarcely move that foot.

The paper was removed in the same manner, and without her knowing it : she could instantly raise her foot. She now complained of pain about the heart : Mr. C. demesmerized her, and she said it was gone. In all these experiments, Mr. C. had most clearly announced to me, in French, what his intentions were ; and the effects coincided so accurately with those intentions, that I confess I was astonished. Deception was impossible. Mr. C. looked round at me, and asked, in French, if I was satisfied. I really felt ashamed to say no, and yet I could scarcely credit my senses enough to say yes. I remained silent. He then asked me, still in a language unintelligible to the patient, ' Shall I bring back a pain or disable a limb for you once more ? ' I of course requested that he would do so. He complied instantly, giving her a pain in the chest once, and disabling her several times from moving her limbs, and removing those effects at pleasure, according to the intentions which he announced to me ; the whole taking place exactly as it had done in every former trial on this woman. As, however, she began to feel faint and uncomfortable, Mr. C. judged it prudent to desist ; assuring me that such experiments as these should never be repeated but with moderation, and only by experienced mesmerizers.

" On questioning the woman, a few days after Mr. C. had produced such decided effects upon her, respecting what had occurred, she declared that he had disabled first one limb, then another, and restored their use, exactly as appeared to be the case ; that she had never felt anything like it in her life before ; that, though she had not slept during the operation, she had felt very drowsy ; that she had not been at all afraid ; but, said she, ' I hope never to see that doctor again, as I am sure he has something to do with the devil.' "

Of the accuracy of this narrative we presume there can be no question ; and it can only be explained by supposing that Dr. C. has acquired, from the habit of exercising his art, and from the confidence which he himself feels, an extraordinary power of affecting the imagination of nervous patients. That this power can be made available to any useful purpose, although possible, it is by no means easy to perceive ; in its application to disease it seems to have produced aggravation rather than relief, and there is no reason to suppose that, under any circumstances, its physical operation can be permanent or important.

MEDICAL STATISTICS.

In a late work by Dr. J. Bisset Hawkins, are some curious facts and speculations connected with this subject. The first chapter of the work contains a comparison of the mortality of ancient and modern times, the result of which is decidedly in favor of the latter. The data on which the calculation is founded, it is confessed, are not very numerous ; but a table is given of the expectation of life at Rome in the third century of the Christian era, which possesses considerable interest. From birth to 20, there was a probability of 30 years ; from 20 to 25, 28 years ; from 25 to 30, 25 years ; from 30 to 35, 22 years ; from 35 to 40, 20 years ; from 40 to 45, 18 years ; from 45 to 50, 13 years ; from 50 to 55, 9 years ; from 55 to 60, 7 years. On the other hand, the modern tables of Mr.

Finlayson gave 40 years as the probable duration of life at the age of 20 ; 29 years at 40 ; 22 years at 50 ; and 15 years at 60. Admitting, therefore, that the mode of estimating probability was the same in both calculations, it would appear that the advantage in point of longevity is decidedly on the side of the moderns. Much of this advantage is attributed by Dr. H. to the improvements which have taken place in medical practice. Hippocrates gives an account of thirty-seven cases of continued fever without local affection, treated only by glysters and suppositories ; and of these, twenty-one died. Yet there is no disease in which we are accustomed to rely more on the effort of nature to effect a cure, than in fever ; and hence the conclusion is irresistible, that medical practice, however undervalued or decried by the ignorant and prejudiced, exerts a most important agency in the diminution of disease and death.

We are by no means disposed to deny the force of the reasoning above stated, or the accuracy of the conclusion obtained, although we cannot believe that the continued fevers of the present day would, if left to themselves, be attended with a fatal result in a majority of the cases. It seems singular, however, that even physicians should so often underrate the efficacy of their own practice, and shut their eyes to the importance of their own art. Hufeland, whose philosophical views on the nature and treatment of many diseases are so well known, maintains on this topic the following remarkable language :—

“ After thirty years’ practice, I am now fully convinced, that of all the patients whom I treat, two-thirds would recover without my assistance or that of medicine, and even under the most opposite modes of treatment. The remaining third I divide again into three parts, of which two-thirds would remain alive without my care. Art only enables them to pass through the disease more easily and quickly, and without leaving sequelæ behind. The last third, therefore, or one-ninth of the whole only, might, without my active aid, become the prey of death ; and here it is certainly not indifferent *how* the patient is treated ; for that mode of cure only which is adapted to the disease and the patient can preserve him ; consequently, the *sanatus fuit* may mean no more than that he did not die, or perhaps that he fortunately escaped the mode of cure.”

It is too true, that even the most attentive and successful practitioner must meet with frequent disappointments in regard to the effect of remedies, and will often find himself to have been deceived both in his diagnosis of his cases, and his anticipation of their favorable or unfortunate termination. These occurrences are but the indications of that uncertainty of the art which is conceded on all hands ; but to deny that the art itself, in its present state, is a blessing to the human race, is to disregard the authority of reason, and the testimony of daily experience.

EFFECTS OF THE GASTRIC JUICE.

FROM some experiments which have lately been instituted on animals, it would seem that this substance does not possess the power, usually ascribed to it, of eroding the coats of

the stomach during inanition. The secretion of this fluid is in fact rather diminished than augmented during hunger. This state does not produce inflammation of the stomach; so that where death occurs from this cause, it is not immediately attributable to any local effect, but must be referred to the general prostration of the vital forces.

BOSTON, TUESDAY, DECEMBER 15, 1829.

CUTANEOUS DISEASES.

A new and much improved edition of Bateman's Synopsis, and an Atlas of his delineations of cutaneous diseases, has been lately published in England. The Editor, Dr. Thompson, has enriched the work with numerous references, and in the margins of the plates he has indicated the different stages of each disease represented. This last is a very great improvement on the original plan; for these diseases change so much in their progress, that what at one time would be a most accurate picture of a disease, might, at a more advanced period of its course, possess no point of resemblance.

In the Atlas, no larger surface is given than is necessary to show the appearance of the eruption, and by this economy, the delineations are afforded at about a tenth part the cost of Bateman's original plates.

VACCINIA IN THE COW.

It is to be regretted that this disease so rarely affects the animal which first furnished it for the human subject. Attempts have often been made, of late years, to procure from the cow some fresh virus, and every pimple which is discovered on the udder is made the subject of experi-

ment. Several cows in Hyde Park, London, were recently affected with an eruptive disease on the udder, and strong hopes were entertained that it was the cowpox. Two attempts were made to induce that disease in the human system, by this matter, but they proved wholly fruitless. Although it is by no means certain that the vaccine virus has deteriorated, yet such a thing is far from impossible, and it becomes, therefore, very desirable to get a new supply from the cow. Those who are in the habit of noticing these animals, should be reminded by the faculty to watch the part on which the disease originally appeared, and give early notice of any eruptive malady. There certainly can be no reason why it should not exist now and in this country, as well as in any former year, or any other country.

Illustrations of the Peculiar Operation of Medicines on different Classes of Animals.—Medicines have very dissimilar effects on different animals. For the expulsion of worms, or to assist the action of purgatives, two drachms of calomel are often given to the horse; two grains would puke the strongest dog. The reason why persons are enabled to give the excessive and preposterous doses of fifteen or twenty grains is, that the stomach very soon rejects

the whole or the greater part ; or if a few grains be retained amidst the rugæ of the stomach, they produce inflammation of the bowels, discharge of blood, and tenesmus. Four ounces of spirit of turpentine may be given to the horse, not only with impunity, but with advantage, in spasmodic colic. One drachm cannot be administered to the dog but with almost certain destruction. From four to eight drachms of aloes are required to purge a horse : the smallest dog requires nearly a drachm ; while six or eight grains will purge the largest hog. Castor oil is with dogs as bland and safe a purgative as in the human subject ; with opium and some aromatic, it is a specific for spasmodic colic in the dog. In the horse, it is uncertain, irritating, and unsafe. Two grains of the antimonium tartarizatum will vomit the largest, and destroy a small and delicate dog. From two to four drachms are, according to the opinions of some surgeons, given to the horse as a vermifuge or as a nauseant, or a diaphoretic ; and a greater quantity has been administered without unpleasant consequences. A drachm of the superacetate of lead would destroy a dog ; an ounce has destroyed the horse ; a pig will drink almost enough to float him, with impunity.—*Provincial Med. Gazette.*

Anatomy of the Skin.—Dr. Weber, of Leipzig, asserts that the sebaceous follicles of the skin are organs distinct from the bulbs of the hair, and that they exist over the whole surface, excepting the palms of the hands and soles of the feet. The bulbs of the large hair are situated very deeply in the derm, and sometimes penetrate even into the subcutaneous adipose tissue ; the sebaceous follicles, on the contrary, are nearer to the cutaneous surface, and are never found extending to the adipose structure. Their size, also, says he, is too large to permit them to be confounded with the bulbs of

the hair, which are much smaller. In new-born children, sebaceous follicles may be discovered on all parts of the skin, with the two exceptions already named. The skin of the scrotum shows them very much developed : each of these follicles is composed of four or five compartments, or cells, agglomerated together ; their transverse diameter exceeds their depth. The greatest diameter observed by the author was a quarter of a line.—*N. A. Med. and Surg. Journal.*

Diagnosis of Dislocation from Fracture of the Neck of the Humerus.—The first part of the sixth volume of the Repertoire contains Dupuytren's directions for distinguishing dislocations of the humerus from fractures of its neck. The position of the arm at the time of the fall is one means of discrimination. If it were thrown outwards or forwards to break the fall, so that the hand first struck the ground, dislocation is the more probable accident. If the person have fallen on the shoulder, while the arm was close by the side, fracture is more likely. Even when the patient cannot tell in what manner he fell, much may be gathered from the marks of contusion and abrasion on the hand in the former case, and on the shoulder in the latter. In luxation, if ecchymosis occurs, it is on the inner and fore part of the arm, because it arises from the laceration of the parts on the inner side of the joint. In fracture, in which it is more common, it is on the top of the shoulder itself, because it is produced by the direct contusion. In dislocation, the prominence of the acromion, and the flattening of the deltoid, are greater than they are in fracture. In the latter, the muscle seems shortened and swollen. In luxation, there is a hollow on the inner side of the deltoid, from the removal of the head of the bone. This is less conspicuous in fracture. These, with the differences in the

shape of the bony tumor in the axilla, in the degree of mobility, in the facility of reduction, and with the presence of crepitus in the one, and its absence in the other, sufficiently distinguish the two accidents.—*Glasgow Medical Journal*.

Suspended Animation.—In a memoir presented to the Royal Academy of Paris, M. Leroy condemns full inflation of the lungs in cases of suspended animation. He related some experiments on rabbits and sheep, to prove that "air, driven once with force into the lungs, occasioned sudden death, and that by full inflation, suddenly made, the pulmonary cells are ruptured." In some cases, air was found in the bloodvessels and cellular substance of the lungs. The rapid distension of the stomach with warm water, and the sudden removal of it, by means of an instrument made by Mr. Read for the purpose, by agitating the thoracic viscera, and at the same time diffusing caloric through them and the abdominal contents, are of much greater consequence in cases of suspended animation than inflation of the lungs. By inflating the lungs with cold air, the heart is robbed of the chief vital stimulant, caloric, which the object of treatment should be to increase.

The application of warm water to the head, warm lavements, and dry friction on the surface of the body with warm flannel, and occasional compression of the ribs, are powerful auxiliaries to the rapid injection and ejection of warm water. Indeed, besides electricity and galvanism,

and occasional agitation of the body, what more can be done to bring the vital organs into action?—*Gaz. of Health*.

Strangulated Rupture.—The Editors of the Journal of Medicine, published in Bourdeaux, have given a case of a large inguinal rupture, which had been in a state of strangulation for five days. Numerous attempts to reduce it having failed, Dr. Brulateur was requested to visit him. The Doctor, after examining the tumor, ordered ice to be applied to it, a large dose of castor oil to be administered, and blood to be taken from a vein. This treatment failing, he introduced a bougie, thickly besmeared with purified opium, into the urethra; soon after which the patient fell asleep, during which the rupture disappeared, and soon after awaking, he had two foetal evacuations.—We should certainly have given a preference to the extract of the belladonna, and have introduced it into the rectum, instead of the urethra; or rubbed a solution of it over the tumor,—a practice, the good effect of which we have noticed in a late number.—*Id*.

Locked Jaw.—An Italian journal relates the case of a woman affected with locked jaw, following a slight wound of the forehead, which was cured by applying the acetate of morphine to a blistered surface on the nape of the neck. Thus applied, it speedily exerted its peculiar antispasmodic powers, although, when administered internally, it proved of no avail.

WEEKLY REPORT OF DEATHS IN BOSTON, ENDING DECEMBER 3.

Date.	Sex.	Age.	Disease.	Date.	Sex.	Age.	Disease.
Nov. 25.	M.	20 yrs	measles		F.	4 yrs	unknown
26.	M.	23	throat distemper	2.	F.	3	convulsions
	F.	75	consumption		M.	35	consumption
	M.	8	unknown		M.	21	dropsy in the head
28.	M.	7 w	lung fever		M.	9 mo	convulsions
29.	M.	46 yrs	consumption	3.	F.	5 yrs	croup
	F.	10 mo	scrofula		M.	21	intemperance
Dec. 1.	F.	52 yrs	consumption		M.	10 mo	infantile
	M.	2	croup				
Males, 11—Females, 6.				Stillborn, 3. Total, 29.			

ADVERTISEMENTS.

MEDICAL SCHOOL OF MAINE.

THE MEDICAL LECTURES at BOWDOIN COLLEGE will commence on TUESDAY, February 23, 1830.

Theory and Practice of Physic, by JOHN DELAMATTER, M.D.

Anatomy and Surgery, by J. D. WELLS, M.D.

Midwifery, by JAMES McKEEN, M.D.

Chemistry and Materia Medica, by P. CLEVELAND, M.D.

The ANATOMICAL CABINET is extensive, and very valuable.

The LIBRARY, already one of the best Medical Libraries in the United States, continues to be every year enriched by New Works, both foreign and domestic.

Every person becoming a member of this Institution, is required to present satisfactory evidence that he possesses a good moral character.

The amount of fees for admission to all the Lectures is \$50. Graduating fee, including diploma, \$10. There is no matriculating fee. The Lectures continue three months.

Degrees are conferred at the close of the Lecture term in May, and at the following Commencement of the College in September. A systematic course of instruction, embracing Recitations in all the branches of Medical Science, Demonstrations, and Lectures, will be given by the Professors, during the interval between the annual courses of Lectures.

Boarding may be obtained in the Commons Hall at a very reasonable price.

Brunswick, Dec. 4, 1829.

Dec. 15.—4teop.

CONSOLIDATED COPAIVA.

“COPAIVA may be given in this form without the least inconvenience. Neither communicating taste, nor imparting odor to the breath, it is also retained without the least disquietude or uneasiness to the stomach; and I am informed by Dr. Rosseau, that in large doses it does not purge.”—*Phil. Journal of Med. Sciences.*

See an article in this Journal, Aug. 18th.

EUROPEAN LEECHES.

An excellent lot of European Leeches, which will be sold at a reasonable price, or applied, in any part of Boston or in the vicinity.

For sale by NATHAN JARVIS, 186 Washington Street, where Physicians will find medicines at as reasonable terms as at any place in Boston.

Aug. 25.

copth.

ANATOMICO-SURGICAL DRAWINGS, and Descriptions of all the Surgical Operations, according to the most approved methods. By L. J. VON BIERKOWSKY. Translated from the German. In two volumes, and 570 drawings on 58 folio plates.

EXTRACTS FROM THE PROSPECTUS.

“Encouraged by the approbation of the Medical Profession, it is proposed to publish a work under the present title.”

“This work contains 570 drawings, on 58 plates folio; to which is annexed, in two volumes 8vo. a concise explanation of each surgical operation. The plates exhibit not only the parts interested in operations, in their natural position and size, but, what is much more important, represent the different acts or stages of the whole operation, while others exhibit delineations of such morbid affections as consist in the change of the natural position, structure, color, &c. In order to afford the work at a moderate price, the plates will be Lithographic; and for the purpose of securing perfect accuracy, engagements have been entered into for their preparation in Berlin, under the especial direction of two of the most distinguished Professors of the University of that city.”

A specimen of the translation, and the plates, is deposited for inspection at the Bookstore of CARTER & HENDEE, who receive subscriptions for the work.

Subscribers will be furnished with the work, and the first impressions of the plates, at the price of \$30.

The subscription list will be open until the 1st of November, 1829, after which period the price of the work will be raised to \$40.

P. S. For the accommodation of subscribers the work will be issued in five Numbers, at \$6 each, payable on delivery. Sept. 29. 18202N1D.

ATREATISE on the Scrofulous Disease, by C. G. HUFELAND, Physician to the King of Prussia, &c., translated from the French of M. Bousquet, by Charles D. Meigs, M.D., is just received and for sale by CARTER & HENDEE.

Sept. 8.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

THE BOSTON
MEDICAL AND SURGICAL JOURNAL.

Vol. II.]

TUESDAY, DECEMBER 22, 1829.

[No. 45.]

I.

VAGINAL DISCHARGES.

On the Use of Nitrate of Silver in Vaginal Discharges.

By GEORGE JEWEL, Esq.

THERE are no diseases, to which the female system is liable, more common, or, to a superficial observer, more diversified or anomalous in their character, than those which are attended by vaginal discharges. So intractable, indeed, do they sometimes prove, as to induce, by their long continuance, even under ordinary circumstances, the severest dyspeptic symptoms, feverish paroxysms, hysterical uneasiness, excessive languor, and emaciation; or, by operating upon the brain through the medium of the digestive organs, occasion other sympathetic affections, still more serious in their nature and termination.

It must be familiar to the practitioner, that every discharge which issues from the vagina, not sanguineous, is among females usually, included in the term *Leucorrhœa*, or "whites." There is also a very popular opinion that vaginal discharges have their origin in constitutional or local debility: hence a complaint of this kind is denominated a "weakness." That such a term should be employed to perpetuate an error in practice, is to be lamented; for I believe, if we

investigate into the pathology of *leucorrhœa*, we shall find, for the most part, general or local increased action to be the exciting cause.

It would appear, from a strict investigation into the numerous causes of *leucorrhœal* complaints which have fallen under my observation, that one uterine affection gives rise to vaginal discharge more frequently than any other,—namely, a subacute or chronic inflammation of the *cervix uteri*. I am disposed to believe, also, that very many of such cases are mistaken for *carcinoma uteri*, and that, in consequence, either no remedies are prescribed, or a very inefficient mode of practice is adopted. I am aware that, in many cases, the train of symptoms about to be noticed may be attributed to an irritable condition of the uterus, so ably described by Dr. Gooch. I cannot, however, easily relinquish the opinion I had originally entertained upon the subject, namely, that inflammation, either of the chronic or subacute kind, of the *cervix uteri* is, in the majority of cases, the exciting cause of vaginal discharge. The distinction, however, although pathologically recognised, cannot, I conceive, be material in practice: indeed, this will be obvious to the talented author himself, whose mode of practice, in cases of irritable uterus, appears precisely applicable to cases of chronic uterine affections generally.

Again, in some cases it may be difficult to discriminate between such diseases as I have alluded to, and incipient scirrhus or disorganization. The following remarks will probably assist the young practitioner in his diagnosis:—

This inflammation of the cervix uteri, like scirrhus or other organic disease of the uterine system, attacks occasionally at the period of life when the catamenia are about to cease; but I have more frequently found it to exist in married women, from the age of twenty-six or twenty-seven to that of forty, and very recently I have seen several severe cases occurring in young married females, within three months after the birth of the first child. The local symptoms in both diseases are very nearly allied, namely, occasional lancinating pain, more or less acute, through the region of the uterus, with a constant dull kind of pain about the inferior portion of the sacrum, the hip, or groin; attended also by an irritable bladder, or frequent desire to void the urine, and in some severer cases by tenesmus. The vaginal discharge is of a milky or cream-like color, and is commonly, but particularly in the more acute cases, mixed with a dark-colored or grumous secretion. Upon making an examination per vaginam in this disease, the os uteri will not be found opened to the same extent as in carcinoma, nor will its margin present the same cartilaginous hardness to the touch. The pain does not appear to be situated in the edges of the os uteri, as described by Mr. Burns, but in the cervix, as pressure upon this part alone occasions the patient to complain. The uterus will be found projecting lower in the vagina than natural; but this will depend upon

the nature of the complaint: the more acute, the farther it will have descended.

It is not my intention to dwell upon the routine practice usually had recourse to in uterine diseases; such as the local abstraction of blood, perfect rest, narcotics, the warm bath, &c.; but rather to draw the attention of the profession to a therapeutical agent, which I believe has never, or to a very limited extent, been employed in such cases, namely, the nitrate of silver, applied directly to the part affected; a practice which I have been led to adopt, from having so frequently witnessed the extensive and healthy changes which have resulted from the application of this remedy to the different mucous tissues, when their secreting surfaces had taken on a disordered or unhealthy action. The mode I have adopted in its application has been either to conceal it in a silver tube, upon the same principle as it is employed in cases of stricture (except that the tube should be adapted to the size of the caustic), or in the form of solution, in the proportion of three grains to the ounce of water, the strength being gradually increased. A bit of sponge, firmly and neatly tied to a piece of whalebone, is to be moistened with the solution, and carefully introduced into the vagina up to the os and cervix uteri. This mode of application is preferable to the injection, and can easily be effected by the patient herself. The application should be frequently made, or no permanent good can be anticipated.

The following cases, which I have selected from others in consequence of their having been unusually protracted and severe, will

exhibit the mode of treatment successfully practised.

I. Feb. 24th.—Mrs. C., æt. thirty-three, had been delivered, three years ago, of a healthy child, after an easy labor. For the last two years and a half, she has been subject to constant and profuse leucorrhœal discharge, with frequent and shooting pains through the region of the uterus, and about the right groin, with occasional dysuria and tenesmus. The general health is greatly disturbed; bowels irregular, with loss of appetite. Upon making an examination per vaginam, pressure of the finger upon the cervix uteri occasioned considerable pain, which, in subsequent examinations, often continued several minutes after the finger had been withdrawn. The os uteri was not indurated, but considerably more open than natural. She had been under the care of several respectable practitioners, and the impression on her mind was that she was laboring under cancer of the womb.

In the first instance the usual mode of treatment was adopted: blood was abstracted by means of cupping from over the inferior portion of the sacrum, to the amount of eight ounces, and repeated three times, with an interval between each of about three weeks. She had taken aperients frequently, and injections of various kinds had been used with little or no benefit.

July 2d.—The nitrate of silver was conveyed by means of the tube, and applied to the cervix uteri for the space of a minute, which occasioned no degree of pain, except what might have been produced by the introduction of the finger.

6th.—The nitrate of silver again applied as before.

9th.—The discharge has diminished, but the pains not having abated, eight leeches were ordered to be applied to the right groin.

12th.—The nitrate of silver again applied.

18th.—The discharge is lessened considerably; and the patient now expresses a belief that she shall soon be restored to health, having previously imagined her case to be hopeless. The nitrate of silver again applied.

27th.—The pain is relieved; general health is improved, and she sleeps well at night. The nitrate of silver applied in the usual manner. It is necessary to observe, that she has taken the hyoscyamus at night (one drachm of the tincture), and the bowels have been regulated by aperients. The following tonic has been prescribed:—

R. Infus. Rosæ ʒ viiss.

Sulph. Quininæ ʒi.

Elix. Vitriol ʒi. M. fiat mist.
sumantur cochlearia duo amplius
ter in die.

August 8th.—The discharge is scarcely perceivable. The nitrate of silver applied as before.

25th.—The patient is perfectly well, having neither vaginal discharge nor local pains.

II. A poor woman, residing in Gardener's row, Westminster, about forty years of age, having several times aborted, had been subject to excessive vaginal discharge for the last eighteen months, with shooting pains through the pelvic region and about the coccyx, and excessive itching of the pudendum. The digestive function was greatly disturbed,

and the system exhibited evident proofs of a highly disordered state of the general health. She had taken for a long period different preparations of bark, steel, &c., and had used various injections, with little or no benefit. Blood had also been extracted locally, by means of leeches. Upon making an examination per vaginam, the cervix uteri was found in the usual irritable and painful state, the margin of the os uteri being perfectly free from induration.

June 12th.—The sponge, as before recommended, was introduced, being well saturated with the solution of nitrate of silver, in the proportion of three grains to the ounce.

16th.—Applied as before.

19th.—The leucorrhœal discharge is thinner, and less in quantity. The patient was directed to introduce the sponge daily in the same manner.

30th.—Has regularly complied with the directions given, and says she is quite well.

August 2d.—Has had no return of the vaginal discharge, and her appearance is much improved. As a matter of course, attention has been paid to the state of the bowels, and the general health.

A case of still greater severity has recently fallen under my notice, which resisted for a very long period all the means which had been tried by several eminent practitioners. At length the iodine was administered, under the influence of which, together with the application of the nitrate of silver, the disease gradually yielded, and the patient is now in perfect health.

I cannot conclude this paper without remarking that there is

nothing more empirical than to hold up a particular remedy as a specific in the cure of disease, or to expect it invariably to exert its curative influence upon the function or structure of an organ, under all the diversified circumstances of morbid action. Let it not be imagined that I place such implicit confidence upon the nitrate of silver, as to expect it to eradicate, as if by magic, all such diseases as those to which I have adverted: at the same time I confidently believe that, if it be judiciously applied where the vaginal discharge has its origin, or is kept up by inflammation of the cervix uteri or vagina, or by the irritable uterus, and when general principles have not been neglected, there is no remedy so likely to afford such immediate and permanent relief.—*London Med. and Phys. Journal.*

II.

TOOTHACH, — TARTAR.

In a late work on the Anatomy, Physiology, and Diseases of the Teeth, by Thomas Bell, F.R.S. F.L.S., &c., we find the following remarks on the treatment of that extremely painful affection, the toothach. Mr. Bell is well known as a Lecturer on the teeth at Guy's Hospital, London.

Of the few local applications which are found useful in this malady, the following, he says, are perhaps the most efficacious:—

- R. Aluminis ʒi.
Spir. Æther. Nitrici f ʒ ss. Misce.
- R. Acid. Muriat. f ʒ ss.
Aquæ distillatæ f ʒ ij. Misce.
- R. Argenti Nitrat. gr. i.
Aquæ distillatæ f ʒ i. Misce.

A small bit of lint, wetted with either of these liquids, may be frequently introduced into the cavity, which should be carefully dried previous to each application.

It is however only by treating this affection, as nearly as the circumstances will admit, upon the same principles as inflammation in other parts, that any relief can, in general, be rationally expected. In those attacks, therefore, in which the inflammation is considerable, and there is any particular reason for preserving the tooth, leeches should be freely and repeatedly applied to the gum, the bleeding being encouraged by repeatedly holding warm water in the mouth. After the inflammation and pain are thus reduced, should the nerve be only in a small part exposed, the means already mentioned for diminishing its sensibility may be had recourse to. But the hope of relief which these remedies may, from occasional success, hold out, is in most instances completely fallacious, and the extraction of the tooth can alone be depended upon.

Respecting the operation of cutting, or rather breaking off the decayed teeth, which has recently obtained among some highly respectable dentists, Mr. Bell says:—

It is an operation irrational in its principle, often useless in its immediate effects, and in its consequences most pernicious. It has always appeared to me to place the operator in a dilemma of evils. The object, I presume, is to cut through, or, more properly, to break off the tooth so low as to remove the whole of the crown, including the cavity which contains the pulp or mem-

brane. If this object be effected, the consequence is that the dead roots remain in the alveoli; and these, if not immediately productive of pain, may yet be expected to occasion much future suffering as extraneous irritating bodies. Every one knows what is the usual result of the existence of dead roots in the jaw, when they have been left either by accident in an attempt at extraction, or by the gradual decay of the crown; and it is surely too much to adopt as an useful operation, that which every one deprecates as an accidental occurrence.

If, on the other hand,—as indeed it frequently happens,—the object aimed at be not fulfilled, the case is placed in a situation incomparably worse than before, the nerve being still more exposed, and the hope of the ready and easy extraction taken away by the loss of that part of the tooth which would have afforded a solid support for the instrument.

Tartar, accumulating on the teeth, is doubtless the cause of much disease in these useful instruments.—On this subject Mr. Bell remarks that—

The constant use of a tooth-brush will, in many cases, be sufficient to keep the teeth free from tartar. The brush should not be very hard, as it will not only be more difficult to clean the interstices between the teeth,—the part in which the tartar is most likely to be deposited,—but, by its friction, will occasion the gradual absorption of the gum, and the exposure of the necks of the teeth. The hair of the brush should be firm and elastic, and not too closely set. The teeth should

be thoroughly brushed in every part, at least night and morning, and the mouth always rinsed after each meal. In those constitutions in which there is a particular tendency to form tartar, it will be necessary to have recourse to some simple tooth-powder, such as prepared chalk, or any other substance equally simple and soft; it may, in some cases, be desirable to combine with it a small proportion of the bone of the cuttle-fish very finely powdered, and, if the gums are spongy and lax in their texture, a little alum, powdered myrrh, or bark, may be added with advantage. Many of the tooth-powders which are offered for sale, with the promise of rendering the teeth beautifully white, perform for a time all that is promised, at the expense of permanent and irremediable injury to the teeth; for they often contain a quantity of tartaric or other acid, which effects a gradual decomposition of the enamel. The use of acids to the teeth cannot be too strongly deprecated. Even where it is necessary to administer acid medicine, it is of considerable consequence that it should be taken through a glass tube, to prevent it from acting upon the enamel of the teeth. For want of this simple precaution, the teeth are very often irremediably injured by the use of this class of remedies.

The tartar is to be removed by means of instruments adapted for the purpose, and commonly known by the name of scaling instruments. They are of several forms, accommodated to the different situations from which the tartar is to be removed, and should be highly tempered, and the edges kept sharp and hard. It is of

consequence that every particle of it should be taken away, not only from the external and internal surface of the teeth, but also between them: for if it be suffered to remain in any part, it forms a nucleus, around which a further accumulation will be immediately deposited. When the tartar exists in considerable quantities, and especially if the teeth are at all loosened, it is proper to remove it at different times, with an interval of some days, that the teeth may recover from the effects of the first operation before the second is performed; and in order that they may receive as much benefit as possible from this plan, the tartar which is formed around the necks of the teeth, and which has been the cause of the loss of the gum, and the consequent loosening of the teeth, should be first removed, which will allow of the gum being partially restored, and the teeth rendered, in some measure, firmer, and capable of bearing, without injury, the subsequent operation. In the mean time, this object will be much assisted by the frequent use of some astringent lotion, according to either of the following formulæ:—

- R. *Aluminis* ʒ iss.
Tinct. Myrrhæ fʒ iij.
Mist. Camphoræ fʒ vss. Misco.
- R. *Vini Rubri Lusitan.*
Mist. Camphoræ āā fʒ ii. Misco.
- R. *Infusi Rosæ* fʒ ii.
Decoct. Ciuchonæ fʒ iv. Misco.

III.

RESTORATION OF A GREAT PORTION OF THE CHEEK BY OPERATION.

A CHILD, nine years of age, was affected with gangrenous inflammation, which destroyed the soft parts constituting the lower half

of the right cheek, and extending from the symphysis to the angle of the lower jaw. The breach of surface was 1 1-2 inch in diameter in every direction. It left but a few lines of the commissure of the lips, and anteriorly was blended with the opening of the mouth. Backwards, it terminated a third of an inch from the anterior border of the masseter; beneath, it nearly reached the basis of the jaw. In the centre of the opening was seen the tongue, which had formed preternatural adhesions by which its movements were impeded, and mastication and deglutition rendered difficult. Another inconvenience, still more formidable, was the constant escape of the saliva. M. Dupuytren tried, about two months ago, to destroy the adhesions of the tongue, but his efforts have been nearly unavailing, as it has always united itself again to the edges of the perforation. About the middle of August, he directed his attention to the removal of the gap by which the saliva escaped. His plan was to borrow a flap of skin from the neck, to twist it, and apply it to the opening, having first cut the edges, so as to afford a raw surface. M. Serres, a young surgeon, of Montpellier, who saw the patient, suggested a proceeding analogous to that adopted for hare-lip. To this, M. Dupuytren objected that the cicatrix thus formed would be kept constantly on the stretch, and that this would cause irritation, if not disorganization. At the same time, he acknowledged the risk of the flap sloughing, and that, even if it united well, it would still be without the buccinator muscle.

On the 30th of August, M.

Dupuytren performed the following operation:—He traced a flap on the lateral and upper part of the neck, anterior to the sternomastoideus; and having cut the edges of the breach in the cheek, he dissected the flap with care, avoiding to wound the external jugular vein; then twisted it on its pedicle, and fixed it by five points of suture. The wound in the neck was immediately united by means of three needles: the operation was long and painful. One or two small arteries were tied, and the patient replaced in bed, without any dressings having been applied. The first night was passed without accident; the child had some hours sleep.

Sept. 2d.—Moderate fever. The flap is alive; some points of suppuration on its edges.

During the night of the 2-3d, some delirium. Inflammation more intense. The flap beginning to separate from the lower part, in consequence of the suture tearing through the lip, it was retained by straps. Next night, delirium more severe; the flap separated at another point, and the opening extending between the two presented a vertical separation about an inch long. The fever now ran high, and the suppuration became fetid. The posterior and upper part of the flap appeared to live, and to have contracted from adhesions. The external edge seemed to be dead. All the sutures were now removed, and the parts supported by means of straps.

5th.—The symptoms abated; some points of suppuration continue on the edge of the flap, but the success of the operation is secure, with the exception of the separation above mentioned, which

will admit of remedy by the common process for hare-lip.

22d.—The consolidation of the parts being complete, the edges of the aperture which remained were pared and brought together with four twisted sutures. After this the case went on well, and the only remaining evil is the adhesions of the tongue. These, M. Dupuytren means, if possible, to destroy.—*La Lancette*.

IV.

APOPLEXY OF THE EYE.

APOPLEXIES have prodigiously increased since the time of Laennec;—thus we have apoplexy of the lungs, of the liver, of the skin, &c; and to these we are now, it seems, to add apoplexy of the eye.—Louisa Martin, aged 45, ceased to menstruate during three months, without inconvenience. She had suffered some injury of the eyes, in early life, from smallpox, and had always had weak sight. To these symptoms had lately been added some appearance of incipient cataract, and within the last twenty days she had been affected with an acute and permanent pain in the right side of the head, with throbbing. Besides this, however, there was no change in the habi-

tual state of her eyes till the night of the 28-9th of August, when she experienced a sharp pricking in the right eye, giving the sensation of a foreign body, which she endeavored to get rid of by rubbing the part. In the morning she found that the sight of that eye was lost. She applied fomentations of rose water, and afterwards cold spirits and water, without avail. On the 6th of September she was admitted at La Charité. The ball of the eye was slightly tumefied; the vessels of the conjunctiva injected; the cornea of the affected side more prominent than the other, and perceptibly softer; behind it was seen an effusion of blood, occupying the lower part of the anterior chamber, changing its place with the movements of the head, and rising to a level with the edge of the pupil. The headach and pricking continued but slightly. The pulse was natural, but there were night sweats.

As this patient exhibited, at the same time, signs of gastric disturbance, an emetic was ordered on the 7th; which was the only treatment adopted till the 10th, when an astringent wash was prescribed; but, as yet, the blood effused has not been re-absorbed.—*ib*.

SKETCHES OF PERIODICAL LITERATURE.

TESTS OF INFANT LIFE.

THERE is probably no subject within the range of medical jurisprudence which has been more agitated, than that of the tests by which the extra-uterine life of the infant is to be

determined from post mortem examination. The following considerations on this topic are abridged from an interesting article in the London Medical and Physical Journal.

Of the great changes which take place in the functions of the animal

economy in passing from the fetal to the vital state, there are some which being accompanied or followed by organic changes, leave a greater or less degree of evidence by which they can be recognized. These regard the functions of respiration, of circulation, and of digestion. The tests of extra-uterine life may therefore be considered under this threefold division.

The effects of respiration are produced partly on the lungs, and partly on the cavity in which they are contained. The change in the thorax regards its size and form; that in the lungs regards their color and consistence, their absolute and specific weight, and their size and situation.

1. The diameter of the thorax in both directions is increased after this function has commenced. An enlargement also takes place in this cavity from above downward, in consequence of the decrease of the concavity of the diaphragm.

2. In fetuses which have never breathed; the lungs are for the most part of a dark red color, which is more remarkable posteriorly on account of the subsidence of the blood. In those whose lungs have been artificially inflated, the color anteriorly is paler. Where some effort has been made at respiration, the general color is the same, but a few spots of a cinnabar-red color are discernible in certain portions of the pulmonary tissue. Where respiration has continued for a short time, the general color is paler red, and the spots are more numerous. Where this function has been perfectly established, the pale red color predominates, with

numerous spots and patches of the cinnabar-red color, and with a darker hue in the posterior part, in which the blood has settled.

3. The density of the lungs is very greatly altered by the establishment of this function. In the fetus which has never breathed, the lungs are firm and compact, like the liver; no crepitation takes place on cutting into them, neither do they emit air when subjected to pressure under water. Where artificial inflation has been employed, or respiration has been imperfectly established, the upper lobe of the right lung will be found to crepitate, and will yield air on pressure. Where respiration has been fully established, these phenomena will occur in every portion of the lungs. In this case innumerable air cells will be found in each part which is examined; distinct crepitation will occur on dissection; and upon pressure under the surface of water, numerous air bubbles, mixed with froth, will rise to the surface.

4. The absolute weight of the lungs is greater after respiration has occurred, and the circulation through these organs established. In order, however, to render this test available, the weight of the lungs must be taken in connection with some circumstance which indicates the magnitude of the fetus. The weight of the whole body most obviously suggests itself as the standard; but this in fact varies much more than that of the lungs; and a more convenient and accurate denominator is furnished by the length in inches. A table, founded on this principle, and exhibiting the weights corresponding to non-

respiration, imperfect and perfect breathing, the length being a given number of inches, has been prepared by Mr. Berndt.

5. As regards specific gravity, it is established, that according as respiration has or has not been present, the lungs will swim or sink in water. When respiration has been perfect, they are sufficiently light to float the heart. The fallacy arising from the occurrence of putrefaction, and the consequent evolution of gases, must here be guarded against.

6. The size of the lungs is the last criterion to be considered in this connection. Previous to respiration, these organs cover the posterior part of the chest, and half the arch of the diaphragm, extending so as merely to touch the pericardium. Their extent increases as the function is established; and when breathing has been perfect, they occupy the sides of the cavity, embrace the pericardium, and cover the whole arch of the diaphragm.

The second great function from which is obtained a test of the respiration is, as has been stated, the circulation of the blood. The most obvious organic change produced from this cause, takes place in the ductus arteriosus. This tube, which is open in the fetus with a diameter equal to that of a goose-quill, gradually contracts after birth, and in from two to three weeks is usually obliterated.

The last function to be mentioned is the digestion, and the structural changes connected with it, occurring in the liver and ductus arantii. The liver lessens in magnitude after birth, but not uniformly. The ductus

arantii contracts gradually, and becomes imperforate about the sixth day.

The following summary of the grounds on which the respiration may be presumed to have been perfectly established, is well calculated to assist the memory of the practitioner.

It may be concluded that the child has lived for a certain period after birth, and has breathed perfectly,—

1. When the transverse diameter of the thorax is from three to four and a half inches; the direct from three to three and a half; and the level of the arching of the diaphragm is between the sixth and seventh ribs.

2. When the color of the lungs is generally pale, with numerous cinnamon-red spots, stripes and edges; and dark red on their posterior surface, on account of the subsidence of the blood.

3. When innumerable cells, distended with air, and collected into insular groups, are plainly visible on the surface; and when the substance of the lungs is everywhere expanded and spongy, crepitating audibly when cut, and yielding air-bubbles and froth, under the surface of water.

4. When the absolute weight of the lungs, as compared with the length of the body, is manifestly and considerably increased.

5. When the lungs even in connection with the heart,—each lobe separately, and each portion of it when divided,—float under the strongest pressure, and are considerably lighter than water.

6. When the lungs quite fill the lateral parts of the thoracic cavity, their anterior edges covering the side of the pericardium, and their under surface the whole arch of the

diaphragm; when their edges are everywhere rounded, and the ligulate elongations of the right middle and left upper lobes are shorter and obtuse.

7. When the length of the arterial canal is contracted to some lines, its thickness to that of a crow-quill, while the thickness of the two pulmonary arteries is equal to that of a goose-quill.

8. When the stomach occupies a completely transverse position, and is either freed from the albuminous matters which it contains in a fetal state, or presents traces of milk, and other extraneous matters; when the bowels are in part or altogether freed from meconium, and, instead of it, contain yellowish feces; and when the urinary bladder is empty.

The table of Prof. Berndt, above alluded to, is as follows:—

1. *Where the length is from 15 to 18 inches*

The weight of the lungs in still-born Males is	3 viijss.
In Females	vijj.
After imperfect respiration, in Males	xijj.
In Females	xij.
After perfect respiration, in Males	xv.
In Females	xiv.

2. *Where the length is from 18 to 20 inches.*

Weight of lungs in stillborn Males	3 ix.
In Females	vijjss.
After imperfect respiration, in Males	xijjss.
In Females	xijj.
After perfect respiration, in Males	xvi.
In Females	xivss.

2. *Where the length is from 20 to 22 inches.*

Weight in stillborn Males	3 ixss.
In Females	ix.
After imperfect respiration, in Males	xiv.
In Females	xijjss.
After perfect respiration, in Males	xx.
In Females	xv.

GUNSHOT WOUND.

A SINGULAR case of this kind is related in one of the late numbers of the Medical Gazette. A man was wounded, by the bursting of a gun, nearly at the point of insertion of the pectoral muscle in the left arm, and a fragment of the lock was left in the wound. This fact was suspected by the surgeon who first saw him, but the foreign body could not be felt on examination, and so slight was the uneasiness experienced from its presence, that the patient was unwilling to believe that it had entered at all. What uneasiness was experienced, however, was referred to the angle of the sixth rib and its vicinity. There was very little bleeding from the wound, but considerable tumefaction over the upper parts of the deltoid and biceps muscles. From about the fourth day the wound became clean, suppuration advanced, and the healing process went on favorably. At the end of a fortnight from the period of the accident, he left London for the country, apparently in good health. During the following week he continued tolerably well, and pursued his usual avocations, complaining only of pain in the side, below the left scapula, and of oppressed breathing, so that he could not respire with comfort unless his chest was supported by a broad belt. On the twenty-second day, after more than usual exertion, the above symptoms became aggravated, so as to induce him to call in a surgeon, and subsequently a physician, who resorted to the usual means for arresting inflammation,—but in vain.

Death took place just a month from the period of the accident.

On examination, the external wound was found not entirely healed, and admitted the end of a probe to the depth of half an inch. On exposing the lateral part of the chest, the only trace of disease which could be discovered was an irregularity of the surface of the sixth rib, not visibly communicating with the external wound. This rib proved to be fractured, and its broken ends, although in apposition, still ununited. In the cavity of the chest, were firm adhesions of the left lobe to the pleura costalis, and on the same side were found nearly three pints of opaque serous fluid, mixed with purulent matter, and containing a fragment of a gunlock, two and a quarter inches in length, which penetrated the lung obliquely about one inch and three-fourths. The rough extremity of this fragment protruded from the lung, and seemed during respiration to have rubbed against the ribs, which exhibited an ulcerated surface. It was situated so near the heart, that in its passage to the lung it had grazed the pericardium, the surface of which was suffused with blood. The substance of the lung, even where it had been penetrated by the foreign body, exhibited no mark of disease. At what period, and in what manner, the body found admittance into the chest; how the avenue through which it passed could be so entirely obliterated, and how it could have remained in contact with the lungs and the pleura without creating more irritation, are inquiries of considerable interest.

NON-MERCURIAL TREATMENT OF SYPHILIS.

THE practice of treating venereal cases without mercury, seems to have its advocates among enlightened and judicious practitioners abroad, as well as in this country. Dr. Desruelles, of the military hospital at Val de Grace, published, about a year since, a statement of the result of his experience in that establishment, founded upon minutes of more than fourteen hundred cases, which is well deserving of attention. Dr. D.'s conclusions are as follows:—1. That the tendency of different tissues to be affected by venereal disease, is in proportion to the number of blood-vessels and nerves with which they are respectively furnished; in other words, to their general susceptibility. The parts most liable to be thus affected, are therefore the mucous surfaces; next to these, the skin; and next, the glandular apparatus. The fibrous parts are placed next in the order of susceptibility, and the bones last. 2. That whatever medical treatment be adopted in these cases, a close adherence to vegetable diet and general antiphlogistic regimen, is highly important. 3. That on a careful comparison of the mercurial and anti-mercurial treatment, whether accompanied or not with a reference to the last direction, the former claims a decided preference. This result is established by a table, in which is stated the number of days required for the cure of cases under the different modes of treatment referred to. The proportionate duration of the cases treated with and without attention to regimen,

other circumstances being equal, was expressed by the numbers 33 and 55, giving a difference of 22 days in favor of the former. That of the cases treated without mercury, and with it, other circumstances equal, was 50 and 56. That of those where both these favorable circumstances were combined, to those where both were wanting, was 30 to 55, or as 6

to 11. Opportunities of so extensive and accurate a comparison of opposite modes of treating the same disease, are not very frequent; and indeed cannot be so. In the present instance the experiment seems to have involved no injustice to the patients themselves; and the results obtained are of considerable value.

BOSTON, TUESDAY, DECEMBER 22, 1829.

SOME inconveniences and erroneous impressions having resulted from an idea that this Journal is under the direction of the Professors in the School of Anatomy in this city, we would here repeat a notice we have already sent to several newspapers, that none of these Professors, nor any Medical Officer of the Hospital, has any control whatever over its pages.

SIAMESE BOYS.

THESE twins had not at the last date reached London.—The last London Medical Gazette contains Dr. Warren's account of them, which had been sent out to some gentlemen in that city. After giving the above-mentioned account entire, the Editors of the Gazette add:—

“There can be no doubt, as it appears to us, but that these individuals might be separated by a very simple operation, and almost with the certainty of giving to each the advantage of a separate existence.”

HERMAPHRODISM.

AN individual exhibiting this unfortunate irregularity of structure was admitted into Charity ward of Guy's

Hospital, Sept. 30th, under the care of Dr. Bright. She was then suffering under a severe form of fever, which rendered her constantly delirious, and in a few days proved fatal.

On her admission,* and more especially when, in order to apply a blister to her head, it was exposed and shaven, every one was struck with the coarse and masculine expression of her countenance: this, and her somewhat square and muscular figure, were all the observations relating to her sex that were made during life; but the post-mortem inspection disclosed the following appearances:—

A body analogous to the penis was observed immediately beneath the pubic arch; not free or pendant, but bound down towards the perineum: its length was about 2 1-2 inches, and it terminated in a somewhat bulbous extremity, a little like the glans, but without the usual delicacy of cutaneous organization, without any perforation for the urethra, and without a prepuce. On each side of this body there was a considerable fulness of the integuments, at first view resembling the female labia, but in reality analogous to the male scrotum, as, like it, they contained

* Speaking of her as a *patient*, we adhere to the sex then assumed. She was admitted as Mary Cannon, æt. 55 or 60.

each a small testis. This separation, into its two halves, of the scrotum, depended on the penis being bound down in the median line, as previously described. The testes were in size like those of a boy 6 or 8 years old, and were connected with vasa deferentia, which were found pervious, and considerably enlarged towards their termination. The vesiculæ seminales were very small; the prostate gland also was remarkably small, and was covered on its sides by a pair of peculiar muscles, passing from the rectum to the neck of the bladder. The urethra terminated in the perineum, about one inch from the end of the supposed penis, and half an inch further there was a blind opening, which faucy might call the rudiment of a vagina, but which was probably nothing more than an enlarged lacuna. The tunica vaginalis was continued some distance up the cord, but at the ring was quite closed. There was a very minute trace of the cremaster muscle. The pelvic viscera had no female character whatever, and the formation of the pelvis itself approached to the male rather than to the female standard. The nammæ were considerably developed, but would have been thought small for a healthy female. The lips and chin were clothed with a few scattered, irregular, curling hairs, not more than are often seen on aged females. The outline of the figure, in its muscular development, squareness and largeness of limbs, &c., was decidedly more male than female. The cerebellum was natural in structure, and if it differed at all from the usual development, was rather small, but this was by no means distinct. No other peculiarities, either diseased or congenital, were observed in any part of the body.

It appears that in the former part of her life, this hybrid had assumed the dress and habits of a man; at one time working in a brick-yard, at another period acting as a groom;

then as a milkman; and afterwards she kept a green-grocer's shop. Her habits and manners were rude and bold, sometimes indicating a degree of derangement; more than once she engaged with success in pugilistic encounters; and it is said manifested still less equivocal male propensities. For the last seven or eight years she has appeared as a female, calling herself Mary Cannon; and, it is odd enough, that she first sustained her new sex at a public house, called "The World turned upside down," where she engaged herself as "maid of all work." She was not, however, fully received by her female fellow-servants as one of them; suspicion hung about her, and care was always taken to provide for her a separate bed.—*Lon. Med. Gaz.*

Extraction of Cataract by means of an Incision through the upper Part of the Cornea.—This method, according to Graefe, offers numerous advantages over those more usually adopted. The consequences of the wound are less severe, and the sight is more perfectly relieved, because the lower part of the cornea remains untouched, and preserves its natural clearness and convexity. In eighteen individuals operated upon by the superior section, seventeen recovered their vision; in one only the cornea on one side became opaque, and this in consequence of a gouty inflammation which frequently returned.—*Bul. des Sc. Med.*

Lachrymal Calculus.—A middle-aged woman experienced pain, during two years, on the left side of the nose, with frequent fits of sneezing, and other symptoms of catarrh. Afterwards, a dryness of the nostril came on, with swelling and complete obstruction on the left side of the nose. This was followed by the sensation of a moveable body in the nose, and, soon after, she passed a concretion of some size from the nostril. It was nine lines in length,

and five in breadth; its color was a brownish grey, and its structure very compact. Being cut across with a saw, its centre was found to consist of a cherry-stone, around which, concentric layers of different colors were ranged,—green, brown and white: the patient was unable to call to mind any circumstance connected with the introduction of the foreign body into the nose.—*Id.*

Application of a Concentrated Solution of Nitrate of Silver to the Eye.—This method has proved so useful in atonic and obstinate ophthalmia, with copious discharge, that M. Graefe thinks it his duty to direct the attention of practitioners to it. The method adopted is to insinuate a drop of the solution, with a hair pencil, between the eyelids.—*Id.*

In this country, the above method is by no means unknown.

Extirpation of the Rectum.—M. Lisfranc, in two cases, removed three inches of the lower part of the rectum. The patients have done well. One was operated upon five, and the other two weeks ago.—*Archives Générales.*

Bone found in the Heart.—Dr. Barbier, of Amiens, presented to the Royal Academy of Medicine a very slender osseous body, an inch and a half long, and pointed at its two extremities, which he had extracted,

after death, from the right ventricle of the heart of a man, sixty-two years of age. This bone had pierced the ventricle in three places, and had commenced to pierce it in three others. The heart had probably pierced itself in its contractions, as the bone was situated transversely in the ventricle.—*Arch. Gén.*

Fetus affected with Fungous Hæmatodes.—Dr. Tonnele delivered a woman of a child, which had upon its right parietal bone an enormous fungous hæmatodes. The base of this tumor originated in the osseous tissue, and perforated it like a sieve; the dura mater was healthy.—*Journal des Progres.*

Study of Anatomy.—An address to the community on the necessity of legalizing the study of anatomy, has just been published by the Anatomical Committee of the Massachusetts Medical Society. This address, or some further account of it, will be presented to our readers in a future number.

Lithotrity.—This new and important operation is engaging the attention of the profession abroad. An account of its merits and demerits, so far as experience has thus far developed them, is in preparation, and will shortly occupy a few of our columns.

WEEKLY REPORT OF DEATHS IN BOSTON, ENDING DECEMBER 12.

Date.	Sex.	Age.	Disease.	Date.	Sex.	Age.	Disease.
Dec. 5.	F.	72 yrs	apoplexy	9.	F.	37 yrs	
	F.	3	lung fever		M.	8 mo	hooping cough
	F.	74	old age	10.	M.	7 yrs	lung fever
	M.	19	drowned		M.	42	bilious colic
6.	M.	2 d			F.	24	consumption
	M.	10 mo	measles		M.	53	do.
	M.	3 yrs	croup		F.	17	rheumatic fever
	F.	25	consumption	11.	F.	15	
7.	F.	4 mo	measles		M.	20	
	F.	27 yrs	intemperance		M.	72	
	M.	3 mo	measles		M.	34	consumption
8.	F.	10 d	convulsions	12.	F.	44	typhous fever
	M.	3 mo	canker in the bowels				

Males, 13—Females, 12. Total, 25.

ADVERTISEMENTS.

NEW MEDICAL BOOKS.

JUST published, and for sale, by **CARTER & HENDEE**,—Malaria; an Essay on the Production and Propagation of this Poison. By **JOHN McCULLOCH**, M.D. F.R.S., &c. &c.

An Essay on the Diseases of the Internal Ear. By **I. A. SAISSEY**, M.D. Translated from the French, by **NATHAN R. SMITH**, M.D., Professor of Surgery in the University of Maryland; with a Supplement on Diseases of the External Ear, by the Translator.

Observations on the Utility and Administration of Purgative Medicines, in several Diseases. By **JAMES HAMILTON**, M.D., Fellow of the Royal College of Physicians, &c. &c. From the Fifth Edinburgh Edition.

A Treatise on Pathological Anatomy. By **WILLIAM E. HORNER**, M.D., Adjunct Professor of Anatomy in the University of Pennsylvania, Surgeon at the Infirmary of the Philadelphia Almshouse, Member of the American Philosophical Society, &c.

Elements of Operative Surgery. Translated from the French of **A. TAVERNIER**, Doctor of Medicine of the Faculty of Paris, &c., with copious Notes and Additions. By **S. D. GROSS**, M.D.

Dec. 22.

MEMORIA MEDICA.

THIS day published by **CARTER & HENDEE**, corner of Washington and School Streets, *Memoria Medica*,—a Medical Common-place Book,—with an alphabetical Index of the most common terms occurring in practice. Carefully selected and arranged by a Fellow of the Massachusetts Medical Society.

From Dr. James Jackson, Professor of the Theory and Practice of Medicine in Harvard University.

Gentlemen,—I have examined the "*Memoria Medica*" which you sent to me. I think the plan of it very excellent, and that it will be found highly useful to practitioners and students of medicine. I have never believed that a voluminous common-place book can be very beneficial to any man, unless he means to become an author. But on the other hand, every one will find an advantage in keeping a common-place book in which he may notice the detached facts which

come under his notice, and which are likely soon to be lost from his memory. The book you have prepared will be found well adapted for this purpose by medical men, and will be more likely to be used by those who procure it than a common blank book, because all the labor of arrangement is saved.

I am, gentlemen, your obedient servant,
JAMES JACKSON.

From Dr. Walter Channing, Professor of Obstetrics and Medical Jurisprudence in Harvard University.

I have examined the *Medical Common-place Book* which was left with your note this evening, and with pleasure offer you my thanks for the publication of so useful a volume. Every practitioner of medicine will agree with the remarks in the preface on the inconveniences and absolute loss of what is very useful, which result from depending solely on the memory. Not unfrequently it happens that some particular prescription is peculiarly suited to an individual. Some time passes, and an occasion again arises in which we believe that the same medicine might be equally beneficial; what it was, however, has wholly escaped us; and though something else may be equally useful, still some regret may be felt, at least by the patient, that what has been found beneficial cannot again be at once resorted to. Some object to an artificial method of preserving, for such and other uses, what may be safely trusted to the memory, if that faculty be faithfully cultivated. I am willing to admit that there is force in this objection; but it is a simple question of fact only we have to consider. If it be true that there is much lost to the individual, and certainly much more to the profession, by trusting entirely to the memory, the occasional use of the *Common-place Book* for the preservation of what is truly valuable, has all the recommendation it needs. For such purposes, viz., for the registering of cases the most rare, and the frequent, if important, epidemics, prescriptions, &c., your *Memoria Medica* promises to be very useful; and for these it well deserves to be recommended to physicians. Students attending hospital practice will find it very valuable. Its tables of names are very full, and under references very easy. I cannot but hope it will get into general use.

Yours, &c.,
W. CHANNING.
Dec. 8.

Published weekly, by **JOHN COTTON**, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

THE BOSTON

MEDICAL AND SURGICAL JOURNAL.

Vol. II.]

TUESDAY, DECEMBER 29, 1829.

[No. 46.]

I.

DISCOVERY OF A NEW SPECIES OF
INGUINAL HERNIA.

SUCH is the heading of a case, such the burthen of many preliminary observations from the reporter, in the *Journal Hebdomadaire*. Our readers no doubt will stare at the announcement, after all the laborious dissections and labored descriptions that already conspire to bother the brains of our young aspirants to collegiate diplomas. But so it is, and it only remains to narrate the case, that is thus destined to swell the present dread array of minutiae in the history of hernia.

The subject, to our honor be it spoken, was an English groom, æt. 27, admitted into hospital on the 1st of June, with an oblong tumor, the size of a couple of fists, extending from the left inguinal ring to the bottom of the scrotum. The skin was red and tense; pressure was painful, and exasperated a fit of colic, which distressed the patient; constipation; vomiting of bilious matter; small and frequent pulse; cold moist skin. He had been subject for five years to a hernial tumor in the groin, which would seem to have never entirely returned, and for which he wore no truss. On the 31st of May, after violent exertion, he experienced sharp pain in the tumor, which soon became hard, enlarged,

and painful to the touch, and colic and nausea quickly succeeded. Between the first occurrence of these symptoms and his admission, attempts at reduction had been made without success.

The warm bath twice repeated, bleedings from the arm, and two tobacco enemata, were prescribed, but no amendment was found on the 2d, and the operation was performed. The sac contained an enormous mass of omentum, with a loop of intestine six or eight inches in length at its posterior part. The omentum was sound, the intestine of port wine color, but elastic, firm, and covered with lymph. The stricture was divided directly upwards, but on trying to reduce the gut, it returned as if by a rebound, and this part of the operation was only concluded after tedious, difficult, and painful efforts. What was now to be done with the omentum? excise it, or leave it where it was? M. Blandin determined on the latter; and after a proper dressing, an enema, and a bleeding, the business was at length completed.

No stool, however, succeeded (a *primâ facie* proof that a stricture remained), and on the 3d we find the patient worse in every respect. The omentum now presented blackish-brown patches, and the belly was the seat of pain. A castor oil enema, thirty leeches to the abdomen, and emollient fomen-

tations, were tried in vain, for the patient continued to sink, and died that afternoon.

Dissection, on the morning of the 5th.—Peritoneal inflammation, with sero-albuminous effusion into the abdomen;—almost the whole floating portion of the omentum in the sac; and the transverse arch of the colon dragged down, and held in contact with the abdominal parietes in the groin. On opening the inguinal canal from above, and drawing out the omentum, the intestine that had been thought to be returned, was found lying in the canal itself, and occupying a *cul-de-sac*, situated at its upper and internal part, and “formed by the hernial sac depressed on this side.” In endeavoring to account for this appearance, it was quickly perceived that the protruded parts had passed out by a laceration (*éraillément*) of the fascia transversalis, situated about two lines behind and above the internal ring, or superior orifice of the inguinal passage; that having passed through this laceration, they had then become lodged in the canal, and had extended both downwards to the scrotum, and upwards to the internal ring, producing, by this double course, a double depression or *cul-de-sac* in their peritoneal envelope. This disposition of the hernia explained the difficulty of reduction, as the gut, during these efforts, instead of passing back through the slit in the fascia, was thrust up into the summit of the inguinal passage. It also seems to us that the laceration itself, through which the rupture took place, could not have been divided to any extent, if at all, or the parts would still have been returned, though probably not with such ease as under ordinary circumstances.

It is evident that the above was only a species of *direct* hernia, after all; not occurring, as usually happens, in the weak part opposite the outer ring, or in some other portion of the abdominal parietes, where nature or accident opens the way, but *into* the inguinal canal. Of course, there is no reason why this description of hernia, always an anomalous occurrence at the best, should not take place here as well as elsewhere; but still we are not aware of any authentic or specific case of the kind, except the present.—*Medico-Chirurg. Review.*

II.

CURIOUS CASE OF ASCENDING PARALYSIS; WITH THE APPEARANCES ON DISSECTION.

CHARLES L., 35 years of age, robust, and in the military profession for fourteen years, during which he had served in the Russian and Spanish campaigns, and consequently been exposed to great fatigues and vicissitudes of climate. In June, 1826, he first perceived that his legs readily bent under him, and that he could not easily raise himself up from the sitting posture. In other respects he had no complaint. In about a fortnight after this, he began to feel numbness in his feet, which gradually ascended towards the knee. But while the surface thus lost its sensibility, the muscles beneath became the seat of acute pain, which was much exasperated by pressure. He had been a month confined to bed in this state, with nearly loss of all power in the lower extremities, when he perceived a numbness invade his hands. The progress was exactly similar to that in the inferior members; and he

was seen by the narrator on the 22d of September, of the same year. He was now completely paralytic, excepting the tongue, the face and the neck. These last became gradually affected. He had never complained of pain in his head, nor of any part of the spine; nor did the most rigid examination detect any physical lesion in this last organ. His general health was good,—his intellects perfect. He attributed his disease to rheumatism, contracted during his bivouacs in Spain. He made water voluntarily, and had a daily evacuation from the bowels. He slept and ate well. The skin was nearly of natural temperature, but quite insensible to pinching or pricking. Any pressure of the muscles, on the other hand, gave him great pain, and caused him to cry out.

Frictions of lytta and alcohol were assiduously employed along the spine, ammoniated liniments were applied to the limbs, and cinchona, with wine, was liberally exhibited internally. In the course of a fortnight, the sensibility of the skin began to return, and that of the muscles to diminish. The power of the muscles also gradually returned, but inversely to the way in which it had been lost,—namely, from above downwards. He was never able, however, to raise himself up on his feet. This amelioration continued but for a very short time, and he was soon as bad as ever. Blisters along the spine were added to the former measures. On the 3d of November, he became suddenly incommoded in his breathing; his pulse quickened; his countenance became anxious; he had cough: the intercostal muscles seemed scarce-

ly to move. In this state he lingered till the 7th of the same month, when he expired without any struggle.

Dissection.—The spinal canal was opened throughout its whole extent. There was very little blood in the venous sinuses. The dura mater in its natural state. The pia mater was sprinkled with calcareous depositions in the lumbar region, and was finely injected. The roots of the lumbar and sacral nerves, as also the great sciatic, were injected with black blood. The other nerves were very minutely examined, but nothing particular was observed. The spinal marrow was rather firmer than natural, and the same might be said of the medulla oblongata and brain. The lungs were filled with tuberculous matters, and there were some small abscesses. The heart was empty and flaccid. The whole of the abdominal viscera were sound. The muscles presented no appearance different from those of a person in health, except being more pale and flaccid.

The foregoing case will show with what a thick veil the functions and diseases of the nervous system are covered. What was the nature of the malady? Was it inflammatory,—or was it the reverse?—*Clinique.*

III.

PROLAPSUS ANI TREATED AFTER THE MANNER OF MR. HEY.

By Dr. McFARLANE.

THE subject of the following case was 54 years of age. On every attempt to evacuate the bowels, the

gut descended about two inches, and the patient experienced much pain and tenesmus. At other times, a prolapsus was induced by an erect posture; and a recumbent position and gentle pressure were always necessary to produce reduction. Frequent hemorrhage from the part, and the constant irritation, had considerably impaired his general health. Under these circumstances, Dr. McF. goes on to say :—

On examining the anus after the gut was replaced, the surrounding integuments were found extremely relaxed. There existed such an unnatural looseness in the attachment of the skin around the anus, to its corresponding cellular membrane, that it could be easily drawn out with the fingers, in the form of one or more large flaps. Having succeeded in two similar cases, which came under my care in the Royal Infirmary, during the summer of 1826, in completely curing the disease, by cutting off the loose integuments, as recommended by the late Mr. Hey,* I determined to try it in this case. The skin was drawn as far out as possible into broad flaps, and cut off with the scissors in a circular direction, until all the superfluous integument was removed, including a portion of the livid and tuberculated fold of mucous membrane which was projected from within the sphincter. The pain was trifling, and only a few drops of blood were lost. A soft compress and T bandage were applied, and he was strictly confined to bed. For a few days, a par-

tial procidentia took place, on every attempt to go to stool. He had a good deal of pain and inflammation around the anus, attended with complete retention of urine, which required the frequent introduction of the catheter. In ten days after the operation, he was able to walk about, and void his stools, without any return of the disease, and in three weeks he was perfectly cured. Pressure was continued to the part for some time longer,—occasional doses of castor oil were prescribed, and he was enjoined to avoid straining at stool.

There will generally be found in obstinate and long-continued forms of this disease, a great relaxation in the connexion of the rectum, at its lower part, with the surrounding textures. This circumstance, although it may not be the original cause, is sufficient, in many cases, to account for the continuance of the displacement in chronic and inveterate cases, although I believe it is generally accompanied by a diminished power of the sphincter. If the rectum, in consequence of being much irritated, as in various bowel complaints, ultimately becomes relaxed, the tenesmus, which is an invariable attendant, may so overcome the sphincter, as to give rise to a procidentia. But when, as in the case now detailed, the erect position is sufficient to cause a descent of the gut, we have grounds for believing, that besides the relaxed state of the rectum, there exists a want of power in the sphincter muscle, which part, along with the levator ani, is mainly instrumental in maintaining the rectum in its natural situation. In the cases de-

* "Practical Observations in Surgery, 2d edit., p. 444."

tailed by Mr. Hey, there existed, in combination with relaxation of the integuments, one or more livid tubercles at the verge of the anus, which were also removed. He expected, from this operation, that inflammation of the surrounding cellular texture would be excited, the attachments of the rectum consolidated, and the power of the sphincter improved. In a majority of cases, the disease will be found to yield (although the cure is often tedious and protracted) to the local applications and internal remedies usually employed. Should it continue, however, as sometimes happens, after the exciting cause has been removed, we will occasionally find that the loose state of the skin around the anus, and the relaxed attachments of the rectum, at its termination, become the primary causes of the continuance of the disease. It is, I conceive, in such circumstances, that this simple operation may be beneficially adopted.

IV.

FUNGUS HÆMATODES IN THE FÆTUS.

In the *Journal de Progrès*, tome XIV., a notice of an instance of this kind is inserted by a gentleman who signs himself Tonnelé, D. C. Tubercles, it is well known, have been found in the fœtus in utero, but we certainly are not aware that any of the genuine malignant growths have been discovered, or recorded to have been discovered, at so early a stage of human existence.

On the 9th of December, 1827, M. Tonnelé was summoned to assist two of his confrères in con-

ducting to its termination a protracted labor, in which the back of the child presented. On our author's arrival, he found that the feet had with difficulty been brought into the vagina, that the uterus was in a state of complete inactivity, and that the waters had been discharged a long time previously. By the joint exertions of all engaged, the whole of the child, except the head, was delivered, but the uterus could not be prevailed on to contract, and the final extraction was only accomplished at last by means of the blunt hook introduced into the mouth of the fœtus, after the forceps had failed. The child was hydrocephalic, but what excited most attention was an enormous tumor of fungus hæmatodes, attached to the right parietal bone, and forming a kind of double head. The base or origin of this medullary tumor appeared to be seated in the osseous tissue of the cranium, which it perforated like a sieve; the dura mater was sound. The serum contained in the cranium might be estimated at about a pint, and the cerebral substance was soft, and macerated in appearance.

The mother of the child was thirty years of age; the father, eighty, but stouter and stronger than many men at sixty. Neither of the parents had ever labored under any cancerous affection. We are satisfied, from the description, that the above was really a case of fungus hæmatodes, as we have witnessed several such tumors in adults, and in every case they had their origin in the cranial bones, more especially the di-

plod. As we before observed, discovered in the human infant we are not aware that medullary sarcoma has hitherto been piping world."—*Med. Chir. Rev.*

SKETCHES OF PERIODICAL LITERATURE.

TRANSFERRED DISEASES.

It is a remark of Dr. Good, that the practitioner who should undertake to trace out the sympathies which the various organs of the body have with each other, would find his time well employed, and his labor rewarded; and there is certainly nothing more curious in medical records, than the accounts of the transfer of disease from one organ or set of organs to another. A case illustrating this part of pathology is recorded in one of the late English periodicals. The patient, a female, aged 15 years, irregular in menstruation, and otherwise unhealthy, was admitted into the Winchester County Hospital, with cataract of both eyes, which had formed in the very short period of twenty days. Alterative and tonic treatment was commenced, and at the end of three weeks the opacity had so far diminished, that she was able to discern objects placed between the eye and the light of a window. At this time she was discovered to have increased urinary secretions, and the usual symptoms of diabetes. This continued, with scarce any abatement, for a week, during which time she passed from thirteen to sixteen pints of urine daily. The cataracts had now totally disappeared, so that she was able to use her needle. The diabetes

now began to diminish, and at the end of a fortnight more the quantity of urine was again natural.

The patient now left the hospital, apparently suffering from debility only. Almost immediately after her departure, the obscurity of vision returned, and at the end of a week she became entirely blind. To this again succeeded diabetes, and again the sight improved until it became as perfect as ever. The quantity of urine continued to increase, until it reached a daily average of twenty pints, when the patient became exhausted by the disease, and rapidly sunk. Death took place about four weeks after the recurrence of the diabetes. No examination was made.

CONSTIPATION.

In ordinary cases requiring intestinal evacuation, there are various substances which offer themselves to the medical practitioner, among which he can make choice according to his experience of their convenience or utility, and any of which will effect the object desired. But in cases of severe and protracted constipation, in which any farther delay will be attended with great suffering and hazard to the patient, it becomes an exceedingly important question what remedy shall be selected, to what extent it shall be given, and how long it shall be persevered in before

it is decided to be incapable of fulfilling the object. Where such cases have occurred, therefore, and have been relieved, it is very desirable particularly to record the means which were found insufficient, and also those which proved eventually successful.

In a case which lately occurred in England, in the Bath Hospital, the patient was a female, 24 years of age. It appeared that a tendency to costiveness had long existed in this patient, but had been controlled by aperients without difficulty, till within a year; during which time the action of the bowels had been very irregular, intervals of eight or ten days sometimes occurring between the evacuations, and much less influenced by medicine than before. At the period of her admission into the hospital, she had had no stool for thirteen weeks. Her diet had been bread and milk, to an amount not exceeding eight or ten ounces daily. During this time she had taken calomel, jalap, salts, gamboge, and aloes, in different combinations. Elaterium and ol. croton had also been given. The latter article had been carried to the extent of four minims, and then omitted, as it produced great pain. The following prescription was ordered:—

R. Ext. Col. Co. gr. v.
Ol. Croc. gtt. 1-4. M.

This was given every four hours, with magnes. sulph. ʒi., and frequent injections of soap and water. At the end of *seven days*, no operation having occurred, the ol. croc. was exchanged for subm. hyd. gr. i., and the pills and mixture ordered

every four hours. On the 12th day of the disease, one stool was obtained. Eight days afterward the mouth became affected, and the calomel was omitted. No stool. Ordered a small bleeding, and pulv. jalap, com. ʒi.—3ss. ter die. Enemata to be continued. At the end of eight days more, another motion was obtained, which, like the preceding, was scybalous. The following was then ordered:—

R. Ext. Col. Co. gr. x.
Ol. Croc. gtt. ss.
Ext. Hyosc. gr. iij. M.

To be taken thrice daily, with sulph. magnes. ʒi. In the course of the succeeding month, four scybalous stools were obtained, and one which was pulpy and of some consistence. The cathartic was altered to the following:—

R. Ext. Col. Co. gr. ix.
Gambogæ gr. i.
Ol. Croc. gtt. ss. M.

to take thrice daily, with sulph. magnes. u. a. This direction was continued, with little variation, for six weeks more, during which time she had ten motions, some of them wholly scybalous, and some of natural character. Another month passed under nearly similar treatment, the discharges becoming more frequent, and of better character. During the following six months, the longest interval between the dejections was one of three weeks, and the bowels could generally be made to act under the use of moderate stimuli.

DEPLETION IN INFLAMMATORY DISEASE.

DR. MARSHALL HALL, in a late work on Sanguineous Depletion, urges the

necessity of adopting some standard by which to regulate the amount of blood to be drawn in various cases of disease. Dr. H. observes that the amount of sanguineous depletion which can be borne without producing syncope, varies very greatly in different cases. In pleuritis, for instance, a patient will bear the loss of from twenty to thirty ounces of blood; while the same individual, when laboring under pneumonia, or affected with simple fever, will faint after the abstraction of one third the amount. Dr. H. thinks it unsafe, under any circumstances, to bleed to syncope in a horizontal posture. The plan which he recommends as a general one, is to place the patient in a chair, or upright in bed, and bleed in that position until syncope is induced. There will then be little danger of this state being protracted to an

alarming extent; since it will be sufficient for the patient to be placed with the head low, in order to secure a return of animation.

The above direction is a convenient one in a practical view, and may doubtless be applied to a considerable proportion of the cases which require this remedy. A change in the character of the pulse, which is often laid down as a criterion for determining the point alluded to, is a very fallacious guide. It often happens that neither the frequency nor the force of the pulse is materially affected, until the approach of syncope. Occasionally, where bleeding is employed for the relief of pain, the cessation of this may afford a sufficient reason for its discontinuance; but, in the majority of cases, the rule laid down by Dr. H. will be found the most useful.

BOSTON, TUESDAY, DECEMBER 22, 1829.

PHYSICAL EFFECTS OF HABITS OF INTOXICATION.

AMONG the various means by which men in all ages and countries have strove to degrade and debase their own natures, none probably has been more generally adopted, or more effectual, than that of intoxication with spirituous liquors. Other degrading habits are limited by their own nature, and by the rules of society, which oblige them to be practised, if at all, in utter secrecy, or by the direct operation of human enactment. Drunkenness stalks abroad in the face of society, meets us in the social circle and in the open street, and

proceeds unchecked by human laws, unless it urge to the commission of acts which on other grounds are regarded as criminal. We do not look for it to other times or to distant nations. We have it constantly with us, polluting our high-ways with its noisome presence, and offending our sight at almost every step. That so glaring an evil should have attracted the notice of the divine and the moralist, is not surprising; we wonder not that they have launched their anathemas against it from the pulpit and the press: but we may feel some degree of surprise that so little interest in this subject has been

manifested by the physiologist and the physician ; that these should not, by investigating its causes and devising means for its cure, have coöperated more earnestly with the former, and lent their aid toward the destruction of the common enemy. We hope that this reproach on the medical faculty will soon cease to exist, and that, by the labors of the wise and good in this profession, something may ere long be effected toward the accomplishment of so desirable an object.

Drunkenness may be considered under the following heads, viz :—1. Its causes.—2. The phenomena by which its presence is indicated.—3. Its immediate and remote effects on the system.—4. Its prevention and cure.—The following remarks will regard principally the first and last of these topics, as it is from the consideration and due understanding of these that we are to expect the most important practical results.

That a taste for spirituous liquors is acquired, and not natural, may be inferred from the aversion which infants and young children usually testify against them ; and with many, perhaps the majority of persons, the taste of *pure* wine or spirit continues in after life to be more or less disagreeable. An exception to this remark is to be found in the sweet wines, particularly those containing carbonic acid, and in cordials ; in which the taste of the spirit is disguised by the saccharine ingredient. A fondness for wine, however, may be acquired at a very early period ; and the questionable practice of indulging young children in the use of

it is certainly too general. In this way, one of the barriers to intemperance is early removed ; the habit of using this stimulus commences as it were with the cradle, and the progress of time naturally serves to confirm it.

A more effectual method, however, of overcoming this inherent aversion to liquor, is adopted with mistaken kindness by the inconsiderate and ignorant. It is not an uncommon practice, among the lower orders of the Irish, to treat their children with small quantities of their own favorite beverage ; and lest their inexperienced appetites should revolt at the draught, care is taken to add sufficient sugar to disguise its real taste ; and thus the fondness for this article, which was implanted for the wisest purposes, is made a lure to induce them to receive what their very instinct pronounces to be a poison.

Those who escape the dangers of childhood are reserved for other and greater perils in youth. The temptation comes to the higher classes through the medium of convivial meetings, in which indulgence in drinking is at once the cause and the consequence of social feeling. Even those who dislike, cannot refuse the potation ; and what was at first taken under the influence of excitement, comes soon to be resorted to as a means of recalling a similar elevation. Fortunately, the rules of society attach a stigma to the occurrence of absolute drunkenness, even at convivial meetings, and he who would preserve the respect of his acquaintance, must even in ebri-

ty keep within certain limits. But this check, though a strong one, is not always sufficient; and he who has learned to enjoy drinking for its own sake, may, when shame or necessity compel him to restrain his appetite in the presence of others, indemnify himself for this privation in the solitude of his own apartment, where he can practise, without control, the fatal lessons he has received in scenes of social gaiety.

But if the progress from moderate to excessive indulgence is thus easily made by the refined sensualist, it is far more easy in another portion of society, in whom the restraint is less, while the temptation is immeasurably greater. The laborer finds in ardent spirits a temporary defence against his worst enemies, cold and hunger. When fatigued by labor, they restore his strength; when without employment, they serve to banish the tedium of absolute idleness. A certain degree of indulgence in spirit becomes, therefore, to the laboring class, almost a matter of necessity; drinking is an affair of daily occurrence, and the gradual increase of the potation leads on to confirmed and inveterate drunkenness.

Another cause of intemperance, common to all classes, may be found in the depression of spirits consequent on misfortune. The loss of friends or of wealth, the disappointment of long-cherished hopes, drive many unfortunate persons to indulgence in ardent spirit as a means of drowning sorrow. This class of drunkards is surely the most to be pitied.

The *prevention* of drunkenness is

evidently to be sought for in the removal of those causes which have been mentioned as leading to it. The practice of giving liquor to children is strongly to be reprobated; they should on no account be indulged in the use of it, even in the most moderate degree; since the very aversion which the taste of the article, when unsophisticated, inspires, may be the means of saving many from the miseries incident to its use; —to remove it, therefore, by this early initiation into the practice, is scarcely less than madness. For the rest, that species of drunkenness which is the consequence of social indulgence can only be prevented by avoiding scenes of dissipation: and in those who are betrayed into it by the habits of manual labor, which seem to demand such a support, a conviction must if possible be created, that no actual increase of corporeal vigor can be obtained by such means; that their potations, instead of strengthening, actually weaken them; that, while they produce an excitement of the brain which impels them to put forth more than the usual amount of muscular force, they waste this force in a far greater degree than they call it into exercise. To the depressed and unfortunate, the means of preventing this habit are also open; they consist in a due regulation of the mind, in resisting the influence of despondence, and in seeking new channels of industry and exertion.

The remaining topic, and by far the most interesting which presents itself in connection with this subject, is that of arresting this vice in its

progress,—of curing, in other words, the disease of drunkenness. Those which have been proposed for this purpose may be arranged in two general classes, namely; the physical and the moral; and it has been, perhaps, by adopting one of these classes of remedies to the exclusion of the other, that both have so often proved unavailing.

Before considering, however, the advantage to be derived from their combination, an important question presents itself. How far is it safe, supposing it can be effected, to put a sudden check to a course of intemperance, which has continued for a considerable time? Does not the system at last become so habituated to the indulgence, that it cannot be given up without danger to life?—If so, after what period does this state of the system occur, and by what symptoms is it recognised?

We have said that this question was an important one. It seems peculiarly so when we consider, that in many cases of confirmed drunkenness, almost the only hope of cure is presented by the chance of giving the system some sudden shock, by which the habit may at once be broken up; and if this course is attended with imminent danger to life, the physician or friend will be compelled, in such case, to leave the individual to his fate, since, of however little value his life may be under such circumstances, he cannot be justified in taking it from him. What then is the amount of evidence by which such a state of things, at any assigned period of the drunkard's progress, is made out?

The ground which is taken by the advisers of moderate measures, in the cases alluded to, seems to be this;—that there are certain states of the system, induced by the continued action of morbid agents, which cause the sudden cessation of these actions to be attended with danger. Thus it is said that persons accustomed to the noisome atmosphere of a dungeon, have borne with difficulty a sudden transfer to a purer medium; and that those who have become climated in an unhealthy country, contract diseases on removing to other regions. From these and similar facts it is argued, that however morbid may be the actions of the system which result from intemperance, the constitution becomes at length inured to these actions, and they cannot suddenly be interrupted without imminent hazard.

This argument, although specious, will not, perhaps, on examination, be found altogether conclusive; for, although the malaria of a prison and the atmosphere of an unhealthy climate are in general noxious agents, it will not be contended that they are so in the instances cited. Instead of acting as poisons, they have, by the supposition, become necessary to the health. If it were necessary to seek, in the influence of atmosphere, an example analogous to that of intemperance, we should select a better one, perhaps, in the instance of intermittents from marsh miasma. The case of a person suffering from tertian or quartan ague, is not very different from that of the periodical drunkard, who permits an interval of three or four days to

elapse between his potations; and drunkards of this sort are not exceedingly rare. Yet we should much question the judgment of that practitioner who should caution the patient with intermittent against changing his situation, lest the attacks of ague should suddenly cease, and thus his system be deprived of its accustomed revolutions. If indeed our judgment on this subject is to be formed from analogy, perhaps a better one may be found in the influence of some other morbid poisons, the habitual actions of which on the system are the necessary condition of certain kinds of occupation, or from peculiar circumstances have been found common to a large number of persons. Numbers of workmen, as is well known, are constantly employed in separating quicksilver from its ores, and the consequence of a constant contact with this substance is the ruin of their health; but we never hear of their suffering from being removed from these influences, though a circumstance not likely, if true, to have escaped observation. Individuals habitually using wines adulterated with lead may be supposed to become at length accustomed to their influence; yet we apprehend little caution would be thought necessary in directing such persons to abandon so perilous a habit. Painters become, in a certain sense, habituated to the same metal; yet we should hardly think of giving such advice to one who was recovering from colica pictorum, as would render probable the return of the disease, lest the too sudden abandonment of the system by such a

companion should prove an injurious change. Is it urged that in these cases the organic and not the nervous system is concerned; we might still adduce more appropriate instances. Those engaged in manipulations in which narcotic substances are employed, are known to be unfavorably affected by their influence. But we doubt whether a change of occupation, in such persons, has ever been found to produce those fatal effects which might, on this theory, be expected from it, and we are certainly inclined to believe the contrary.

We may perhaps pursue this inquiry more profitably, however, by considering the peculiar symptoms of that stage of drunkenness to which, if to any, the argument is applicable. It is acknowledged on all hands, that so long as the indulgence in liquor is but occasional, so long as it cannot be called a habit, the danger from its omission is too trifling to be regarded. On the other hand, it is conceded that when, from long-continued intemperance, structural changes have been produced, such as occur in the liver and other viscera, the stimulant must be discontinued at all hazards. The state between these,—that in which intoxication is confirmed into a habit, but without having as yet produced its worst effects on the constitution,—is the critical period. At this period the drunkard experiences his periodical cravings for his dram,—that inward gnawing which cannot be borne, and which must be relieved, and can be relieved only by renewing the inebriating draught. If this were indeed the only condition of escape from

the suffering of this state, the condition of the drunkard would be truly deplorable ; since the inevitable effect of drinking would thus become its necessary cause. But this is certainly not the case ; for the most inveterate drinker will often allow this state to subside, as it will at length of its own accord, or relieve it by other means, and will wait till the balance of his system is restored and his strength renewed, before he ventures to repeat the indulgence. That a certain craving sensation is the immediate consequence of a fit of intemperance, is in the great proportion of cases undoubtedly true ; but to confound this with the morbid appetite which induced the indulgence, is, we apprehend, a serious error. The drunkard, in repeating his draught, is not always impelled to it by a necessity arising from the reaction which succeeds his last potation : this reaction brings with it repentance and loathing ; and often it is not till these have passed away, that the desire for liquor returns,—a desire which his resolution is not able to withstand.

Admitting, then, what cannot be denied, that the drunkard who is used to periodical libations will, at the return of certain periods, feel an almost irresistible longing for his usual gratification, it by no means follows that the resistance of this longing, even to the entire omission of the stimulus, will be followed by any dangerous consequence ; on the contrary, both reason and experience teach that if successfully resisted in one instance, the temptation will recur each time with less power, and

at length entirely cease. That no ill consequences follow the omission in these cases, is confessedly not proved, and is perhaps incapable of proof ; but the cases where such have been supposed to occur are very few, and by no means sufficiently decisive to warrant the inference that such omission is attended with serious danger.

But defective as the supposition alluded to is in point of argument, it is still in accordance with a common prejudice ; and if the drunkard could be made to give up his potations by degrees, the end in view would be equally obtained, and perhaps with less suffering on his part than if they were at once to be abandoned. But it is in the practical application of the theory that the main difficulty lies. Many ingenious expedients are indeed recorded by which the victim of intoxication has been induced to abridge, from day to day, the quantity of his liquor. But, for the most part, such expedients always have, and, from the nature of things, always must prove futile. The drunkard cannot renounce his habits by degrees. He cannot day after day repeat the labor of self-denial, which is as essentially necessary to a reduction, as to a total omission of his draught. Nor would he find, we imagine, in the diminished quantity, a charm to dissipate completely that uneasy sensation from which so much danger is dreaded. This sensation is a feeling of pain, and unless enough be taken to stupify it, will not be effectually relieved. There will still remain a desire for more ; and this, if resisted ten times and then yielded

to once, will undo in a moment the work of so much time and labor.

It is then alike the dictate of reason and of experience, that the drunkard should stop short in his career, at whatever point of his downward course he may have arrived, and at once forsake the habit which is hurrying him to ruin. The effort to do this will of course result principally from his own resolution; but no inconsiderable aid for this purpose can be afforded him by his friend or medical adviser. *He* will set before him, in strong language, the tremendous consequences of the course he is pursuing; the loss of health, of reputation, of domestic comfort, of everything which makes life valuable, and in fine of life itself. This indeed is all which, until of late, it seems to have been thought possible to do for the drunkard, and when these failed, he was to be left to his fate. Recently, however, another indication for the cure of intemperance has been suggested, which has been acted on with considerable success, viz., that of inspiring a disgust for the liquor, by administering it in union with some article disgusting in taste, or disagreeable and painful in its effects, and especially with such as possess an emetic property. On this principle certain popular compounds have been formed, containing antimony, or some other emetic, as their principal ingredient, combined with some article capable of communicating to the whole a distinct and peculiar flavor. A certain quantity of this compound being added to the favorite liquor, causes it to produce

vomiting and nausea; the recollection of which being associated with the spirit, is intended to inspire the drunkard with a lasting aversion for the latter. Whether the circumstance of sapidity in the article employed would favor this effect, might well be doubted; since the peculiar taste, against which the disgust is inspired, is not that of the liquor itself, but of something distinct from it, and would therefore seem less likely to produce the desired effect. In practice, however, sapid articles have obtained the preference.

With respect to the probability of a cure from this mode of treatment, we seem scarce able as yet to form a decisive judgment. In many instances its success has been unequivocal and entire; the individuals having contracted so complete a disgust for spirit, as never to have tasted it afterward. In a greater number this effect has been temporary, lasting for months or weeks only, while in some, little or no effect has been produced. The conclusion which may be gathered from the reports of the most intelligent persons who have made trial of this method, seems to be this;—that where the moral powers are strong, where the individual has been capable of reflection and possessed of some decision of character, these have stood him in stead against the diminished temptation; so that, though the mere animal disgust would ere long be effaced, time will in the mean time have been afforded to the patient to experience the advantage of regular habits, and for a moral energy to be awakened adequate to prevent him from incur-

ring a second time the danger he has once escaped,—while on the other hand, in the man of a feeble mind, and without force of character, the temptation will gradually regain all its original power, and the habit re-assume its pristine dominion.

VACCINE MATTER.

THE French Academy of Medical Science approve of a method of preserving this substance for transportation, by enclosing a quill, prepared in the usual manner and dipped in it, in another quill of similar shape and size, both having been cut so as to retain at their largest end a portion of solid substance, sufficient to exclude the air. In this way it is said the matter may be preserved a long time, if taken as early as the *fifth* or *sixth* day, before it has lost its aqueous character. If taken later, it is said to have more tendency to decomposition. We have often seen this mode adopted as a convenient one for transporting matter; but where preservation for a considerable time is required, the old method of enclosing the fresh virus between two plates of glass seems to us preferable. Whichever mode is adopted, an external covering is requisite as a preservative from light.

Variolaria.—A very valuable addition is now making to the materia

medica by the foreign chemists, though we believe that it has not yet found its way to England. It consists in the use of variolaria as a substitute for quinine. This species of lichen grows in abundance on the bark of the beech tree in mountainous districts; and, from experiments, we believe, first tried by M. Cassebeer, it is proved to have the same febrifuge qualities as the Peruvian bark.—*English Paper*.

Transfusion.—The unfortunate man who yesterday underwent the operation of having blood transfused into his veins by Mr. Green, at St. Thomas's Hospital, as the only means left to restore his life, sank under exhaustion, and died yesterday afternoon at three o'clock.—The last successful case of transfusion of blood was performed upon a lady at Walworth by Dr. Blundell, on the 7th of December, 1828.—*Id*.

The Siamese Brothers.—These twins arrived in London, in good health, on the 20th of November. An account of them, drawn apparently from that of Dr. Warren, has been presented to the French Academy by Dr. Niles, of Paris,—formerly of this city. A report on the subject has been delivered by M. Geoffroy St. Hilaire, but the substance of this latter we have not yet learnt.—These twins are represented, in an English Journal, as a *native American*!

WEEKLY REPORT OF DEATHS IN BOSTON, ENDING DECEMBER 19.

Dat.	Sex.	Age	Disease.	Date.	Sex.	Age.	Disease.
Dec. 10.	F.	17 yrs	rheumatic fever	14.	M.	10 mo	lung fever
11.	F.	14 mo	measles		M.	64 yrs	brain fever
	F.	37 yrs	inflammation of bladder	15.	M.	12 mo	unknown
	M.	29	consumption	16.	M.	4 yrs	worms
	M.	12 mo	infantile		M.	4	disease of the head
	M.	34 yrs	consumption	17.	F.	79	old age
12.	F.	44	typhous fever		F.	10	unknown
	M.	15 mo	measles		M.	26	accidental
	M.	7	lung fever		M.	50	disease of the heart
	F.	33 yrs	consumption		M.	30	accidental
	M.	3 1-2	croup		F.	18 mo	dropsy in the head
	F.	30	old age	18.	F.	15	do.
13.	M.	68	consumption	19.	M.	35 yrs	intemperance
	F.	57	unknown	Males, 16—Females, 11. Total, 27.			

ADVERTISEMENTS.

MEDICAL SCHOOL OF MAINE.

THE MEDICAL LECTURES at BOWDOIN COLLEGE will commence on TUESDAY, February 23, 1830. Theory and Practice of Physic, by JOHN DELAMATTER, M.D.

Anatomy and Surgery, by J. D. WELLS, M.D.

Midwifery, by JAMES MCKEEN, M.D.

Chemistry and Materia Medica, by P. CLEVELAND, M.D.

The ANATOMICAL CABINET is extensive, and very valuable.

The LIBRARY, already one of the best Medical Libraries in the United States, continues to be every year enriched by New Works, both foreign and domestic.

Every person becoming a member of this Institution, is required to present satisfactory evidence that he possesses a good moral character.

The amount of fees for admission to all the Lectures is \$50. Graduating fee, including diploma, \$10. There is no matriculating fee. The Lectures continue three months.

Degrees are conferred at the close of the Lecture term in May, and at the following Commencement of the College in September. A systematic course of instruction, embracing Recitations in all the branches of Medical Science, Demonstrations, and Lectures, will be given by the Professors, during the interval between the annual courses of Lectures.

Boarding may be obtained in the Commons Hall at a very reasonable price.

Brunswick, Dec. 4, 1829.

Dec. 15.—4teop.

NEW MEDICAL BOOKS.

JUST published, and for sale, by CARTER & HENDEE,—Malaria; an Essay on the Production and Propagation of this Poison. By JOHN MCCULLOCH, M.D. F.R.S., &c. &c.

An Essay on the Diseases of the Internal Ear. By I. A. SAISSEY, M.D. Translated from the French, by NATHAN R. SMITH, M.D., Professor of Surgery in the University of Maryland; with a Supplement on Diseases of the External Ear, by the Translator.

Observations on the Utility and Administration of Purgative Medicines, in several Diseases. By JAMES HAMILTON, M.D., Fellow of the Royal College of Physicians, &c. &c. From the Fifth Edinburgh Edition.

A Treatise on Pathological Anatomy. By WILLIAM E. HORNER, M.D., Adjunct Professor of Anatomy in the University of Pennsylvania, Surgeon at the Infirmary of the Philadelphia Almshouse, Member of the American Philosophical Society, &c.

Elements of Operative Surgery. Translated from the French of A. TAVERNIER, Doctor of Medicine of the Faculty of Paris, &c., with copious Notes and Additions. By S. D. GROSS, M.D.

A Treatise on the Nature, Cause and Treatment of Contagious Typhus. From the German of J. VAL DE HILDEBRAND, Imperial and Royal Counsellor, Professor of the Practice of Medicine in the University of Vienna, &c. &c. By S. D. GROSS, M.D.

An Essay on the Morbid Sensibility of the Stomach and Bowels. By JAMES JOHNSON, M.D.

Examinations in Anatomy, Physiology, Practice of Physic, Surgery, Chemistry, Materia Medica, and Pharmacy. For the Use of Students. By ROBERT HOOPER, M.D.

Dec. 22.

MORBID ANATOMY.

CARTER & HENDEE have just received,—The Morbid Anatomy of the Stomach, Bowels and Liver; illustrated by a Series of Plates from Drawings after Nature, with explanatory letter press, and a Summary of the Symptoms of the Acute and Chronic Affections of the above-named Organs. By JOHN ARMSTRONG, M.D.

The above work will be completed in six numbers, at \$6.00 each. Three numbers are already published. Subscriptions received by C. & H.

Oct. 6.

2am3m

MEMOIR OF DR. HOLYOKE.

JUST published, and for sale by CARTER & HENDEE,—A Memoir of EDWARD A. HOLYOKE, M.D. LL.D., prepared in compliance with a vote of the Essex South District Medical Society.

A TREATISE on the Scrofulous Disease, by C. G. HUFELAND, Physician to the King of Prussia, &c., translated from the French of M. Bousquet, by Charles D. Meigs, M.D., is just received and for sale by CARTER & HENDEE.

Sept. 8.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months; and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

THE BOSTON
MEDICAL AND SURGICAL JOURNAL.

Vol. II.]

TUESDAY, JANUARY 5, 1830.

[No. 47.]

I.

MODERN MEDICAL ETHICS ;

Or State Maxims in Medicine.
By PHILO-ETHICUS, *Artium*
Magister, &c.

(CHAPTER THE FIRST.)

MEDICAL ETHICS (in the modern sense) must be considered the most important branch of our professional studies, because it involves the *science* of life (a knowledge of human nature) and the *art* of turning that knowledge to the greatest possible advantage. Now it is very remarkable that, although this noble science of life, this useful *art*, has been cultivated with great success during the last twenty years, and is now brought to the highest degree of perfection, not a line has been written on the subject, or any code of instructions put on record, for the benefit of the *rising* or the *falling* generation! It appears to be what lawyers call the *LEX NON SCRIPTA* ;—it is perfectly well understood by adepts ; but hitherto it has been thought incapable of taking a tangible shape, even under the creative power of the press. We believe this is partly true ; for much of the noble art is, like the *tact* or even the skill of the physician, incommunicable by words. But still we hope to show that there are fundamental maxims in medical ethics which will prove useful text-books for those who are de-

sirous of making progress in the art. Some one has said, “*ars tota in observationibus*”—that is, medical practice consists entirely in the treatment of single cases. So in medical ethics, the whole consists of insulated maxims founded on observation. These maxims require no particular arrangement—at least we shall give them none—but we will set them down as they occur to our recollection, and solicit the assistance of our friends in augmenting the list from time to time. We shall commence with the medical man’s initiation into *practice*. With the previous education, classical or professional, we have nothing to do. There are different opinions respecting the necessity of either ; and we shall not attempt to unloose the Gordian knot.

CHAPTER I.

MAXIM I.

Set up your carriage. Without this symbol you cannot *get into practice*—without it, you could not *get through practice*—and without it, you should not *go out of practice*. To *get into practice*, let your carriage be elegant, your liveries splendid, your horses very fast goers. If they run over half a dozen hapless pedestrians annually, and your coachman is punished by the magistrates, all the better. Even an occasional *deodand* will be a *God-send* in the way of repu-

tation. To *get through* practice, you may slacken your pace, reduce the breadth of the embroidery on your liveries, paint your carriage but once in three years, and exchange your blood horses for common jobs. To *get out of* practice, it is not essentially necessary to put down your carriage. There are many other auxiliaries, which it would be useless to mention. The progress is somewhat analogous to that of parturition,—it is wonderful what NATURE and TIME will do in this way !

You should never be seen lolling about in your carriage, “*spying farlies*” out of the windows. Always appear to be making notes of your appointments ; and ever and anon call out to the coachman to quicken his pace. Be sure to have an inkstand pinned in front of the carriage, and keep the seat strewn with letters from your patients.

MAX. II.

Dress and Address.—Great attention should be paid to these, while *getting into* practice. When your reputation is firmly established, your dress may be slovenly even to malpropreté ; and your *address* may be uncourteous even to rudeness, with considerable advantage. Strange as it may appear, it is yet a certain fact, that it is nearly as difficult to throw off as to acquire a well-earned fame in medicine. On the other hand, fame without a solid foundation, is like a ship without ballast,—liable to be upset by the first squall.

MAX. III.

Search the journals for a long catalogue of desperate cases, which you are to get carefully by heart, making them all terminate favorably under your own superintendence. With a minute retail and

detail of these, you are to entertain each of your patients during three-fourths of the time which you devote to the daily visit. You are also to relate the same histories to every individual with whom you come in contact, professional or non-professional, so long as they have patience to listen to, or credulity to believe them. This maxim ranks next in respectability, and perhaps success, to the ingenious *patent one* of Dr. Eady.

MAX. IV.

Never appear at the Opera, theatre, public assembly, private party, or medical society, without a well-arranged plan of being called out,—in other words, of being “*particularly wanted*,” to attend some person in great danger. If any noted personage can be prevailed upon to lend his or her name, as the *appellant* on such occasions, the patronage will be invaluable. The moment the call is made, you are to bustle forth, otherwise the advantage of a personal recognition may be lost.

MAX. V.

Hospitals and Infirmarys. There is now some discrepancy of opinion respecting the policy of connecting yourself with a public institution. If you are *very clever*, you will hardly want such an auxiliary ;—if *very much the reverse*, you may stand a chance of some unpleasant exposures. In all cases it is very proper to present yourself as a candidate, taking care to procure a long list of testimonials for the printed circular and for the public advertisement.* If defeated, you

* There is not the slightest necessity even to announce your intention to canvass for an appointment to an hospital or dispensary, when any vacancy occurs. You have only to say that you will, on a *future occasion*, present yourself as a can-

have "made yourself favorably known to the public," and are entered on the list for every future contest. If successful, a wide theatre for your talents and ingenuity is opened. As a matter of course, you become a public lecturer; and a necessary consequence is, a niche in the **TEMPLE OF FAME**, i. e., the head of the first column in every morning paper. In this extended metropolis, it is essential that every facility should be given to students, who wish to attend your lectures; and therefore the *particulars* are to be learnt, not only at the school where you teach, but at all the medical booksellers' shops, and especially at your *own residence*, which is to be carefully pointed out in the newspapers. But besides these announcements, you are frequently to advertise your lectures on a new and specific plan. Not only are all the *diseases* on which you descant to be minutely enumerated in the advertisement, but the principal *symptoms* of these diseases are to figure in the columns of the Times, Herald, and other fashionable papers. These are your golden advertisements.*

You are also to publish, through every possible channel, a monthly or quarterly numerical view of your public practice, according to a peculiar plan of registry of your own. The following specimen will afford you some idea of the plan.

Of 1000 patients treated at _____, during the month of _____, nine hundred were completely cured; 75 were greatly

relieved. This is an excellent and legitimate advertisement.

* It is not necessary, nor is it at all expected, that lectures should be actually delivered by those who keep them constantly advertised. That is quite a separate concern.

relieved; 15 absented themselves; 9 were discharged incurable; and 1 died.

In visiting out-patients of the hospital or dispensary, you should always leave your carriage or cabriolet at the door of the best house in the neighborhood of the patient. This will well reward you for the little additional walk.

MAX. VI.

You must, by all means, make a collection of diseased structures, by begging all morbid parts that your friends may meet with. It is not of the slightest importance that you should be acquainted with the histories of the cases. These specimens of *diseases*, or "**BOTTLE IMPs**," you are to keep ranged in the room where you see your patients, or in a neighboring apartment; and you should take care to show them to all your patients, telling them that these were the only cases which you failed to cure in your extensive practice, and that they are now bottled up for the benefit of the living, as they enable you to detect diseases with unerring certainty. This is a measure of the very first importance.

MAX. VII.

Write a book; or rather get some literary hack to write one for you, and dedicate it at once to the general reader. Medical men have neither time to read, nor money to buy the tentative essays of their contemporaries;—address yourself, therefore, boldly to the whims, prejudices, fears and foibles of the public. In your book, there is no occasion to investigate principles, but only to display the superiority of your own practice. Let your work therefore be studied with desperate cases, all terminating favorably, after the first

men in the profession had failed. Give no other names or places of residence except the Duke of A——, the Marquess of B——, the Earl of C——, and so on ; and never descend lower than an M.P. Interlard the cases with extracts of letters from your patients, describing their complaints, and the great efficacy of your medicines. Dedicate your work to some fashionable physician or surgeon, from whom you will be sure to receive a complimentary letter that will be very serviceable on many occasions afterwards.

Supposing (which is not very likely to be the case) that you have made any useful discovery in medicine or surgery,—you are not to be such a simpleton as to reveal it openly to your professional brethren, who would instantly take advantage of it, without thanking you for your candor. No. You are to manage this point with great care and caution. A complete concealment of the remedy would subject you to the imputation of quackery ; but you may throw such obscurity about the preparation, the dose, the administration, &c., of the medicine, while at the same time you dilate so amply on its miraculous efficacy, as to draw to yourself the whole practice of the remedy. If it be a piece of surgery, as straightening a crooked spine, widening a narrow channel, removing a troublesome excrescence, or, in short, performing any operation, then you are to show that a peculiar manual dexterity, which cannot be described in words, has given you a facility and success quite worthy the attention of the public.

MAX. VIII.

If you are dubious of success, become a violent sectarian or po-

litician. You will then be sure of employment among one party. Half a loaf is better than no bread.

MAX. IX.

The Grand Secret.—The key-stone maxim on which all the great principles of medical ethics rest, has not yet been stated. It is to occupy a great portion of your nightly studies and daily avocations. You should not move a step without it. It is to the medical practitioner what the compass is to the mariner,—what the pillar of light was to the wandering Israelites. It consists in the constant habit or practice of *extolling yourself, and depreciating your neighbor*. This is, fortunately, not only the most useful maxim, but it is that which is most easily put in execution, and has the widest field for its application. No day in the week, nor hour in the day, can pass without presenting you with abundant opportunities for working this grand engine of advancement. It has this advantage, too, that it may be practised, by way of amusement, at those periods when you have no other kind of practice on hand. All your friends can assist you in this way, without opening their purses ; and a gossiping female, with a long and nimble tongue, may go far to make your fortune.

It is of great importance, however, that you should acquire adroitness and tact in the exercise of this leading maxim. Gross self-flattery may draw on you ridicule ; and open defamation of your neighbor might draw on you the harpies of the law. Thus, suppose you are called in to a dangerous case, where another practitioner has been before you.

You are not to say, in the presence of competent witnesses, that your predecessor had murdered, or poisoned, or ruined the patient. For doing so, £500, with costs, were paid not a thousand years ago. If you have a particle of expression in your countenance, you may, by looks, and gestures, and tones, and monosyllables, effectually harrow up the feelings of the parents or friends, and convince them that the life of the patient has been endangered or lost by the practice hitherto pursued.

"Sunt verba et voces quibus hunc, vexare, dolorem."²⁰

The less danger there is in the case, the more decidedly must you make it appear that there is *now* scarcely a chance of recovery; but nevertheless you will make one effort to save life. A cure performed under such desperate circumstances, will greatly spread your own fame, while it fulfils the other part of the grand maxim, by depreciating your neighbor.

In all cases, without exception, where you are separately applied to as the secondary or ternary

consultant, you are to express your regret that you had not seen the case before it had gone thus far. By this expression you do not entirely violate the truth, and even if it comes to the ears of the former consultants, you may defend the expression, as one used by the very first authorities in the profession.

In consultations, and especially in this metropolis, it is necessary to be a little cautious how you express or insinuate disapprobation of your brethren;—and *kions* from the country often get themselves into difficulty in this way, when first settling in London. Still, although it may not be prudent to assume any superiority on your own part, or inferiority on the part of your colleagues, you are never to lose sight of the principle, but to manœuvre so that the patient or friends may *infer* that superiority which you dare not openly *claim*. This may be done in a thousand ways, by a man of ingenuity. Thus, suppose you are called in when an acute inflammation has been subdued, or all but subdued, by active measures, and yet where pain, irritability, or other unpleasant feelings remain? you are strongly to insist on an anodyne, which could not have been safely prescribed before. The consequence will be a tranquil night, blessings on the new doctor and his prescription, and as a necessary corollary, a reflection on the previous treatment.

Suppose, on the other hand, some acute or subacute inflammatory action arises in the course of a chronic and obscure complaint, and you are called in at this juncture: you are immediately to recommend moderate deple-

* The writer of this article is now attending the wife of a tradesman, who had been under the care of a respectable practitioner in Southwark, and who recommended his patient to go into the country for a few weeks, giving her, at the same time, some prescriptions for her use. She went to a village fourteen miles from town; but not getting better, she sent for a practitioner of the place, and showed him the prescriptions of the other gentleman. He did not mince the matter, but exclaimed at once, that she might just as well have been swallowing arsenic all the time, as the medicines she had been taking! She believed it,—came back to town soon afterwards,—and discarded her former medical attendant without his knowing why or wherefore! Nothing is more common than this practice.

tion (the measure, in fact, which was about to be employed by the previous attendants); the consequence of which will be, a temporary amelioration of symptoms, and a conviction, on the part of the patient and friends, that this depletive measure ought to have been long before employed. If the chronic disease, on which the acute or subacute supervened, be of a necessarily fatal nature, you are to give pretty strong hopes to the family of recovery, especially if the prior attendants had expressed their doubts on this point. The falsification of your hopes by the final event, is not of the slightest consequence. You will have injured your colleagues, mean time, in the opinion of the friends (for the last opinion is always considered the best), and you will have plenty of time to modify your prognosis afterwards; and, as the fatal catastrophe approaches, to fling the blame on your neighbors, by insinuating that, had more active measures been early employed, the event would have been different. This is a first-rate maxim, and is one of great power when artfully executed.

If an opinion has been given by your colleague or colleagues as to the nature or seat of the disease, you are always to give an opinion somewhat different, and take care that the parents or friends of the patient know it. If no dissection takes place, you are triumphant, because you can maintain positively that you were right, and that the others were wrong. If a *post-mortem* examination is permitted, you must still show your skill and dexterity by making the pathology correspond with the diagnosis. Nothing is more easy than this, to a man of

parts and *pretensions*. Suppose, for example, that a man dies after you had pronounced that the disease was inflammation of the brain. When the scull-cap is removed, you are to knead the brain with your fingers, in the same way that a baker kneads dough in a trough, under the pretence that you are feeling for abscesses. On prosecuting the dissection, you will find some portions of brain softened down by the above process. These you are to scrape off on your scalpel, and triumphantly show them round as portions of *suppurated brain*. It is of no consequence that there should be no injection of vessels, or other marks of inflammation: these have all disappeared before death, leaving the purulent matter to prove the correctness of your diagnosis. In short, there is no part of the body in which a fertile imagination and a good modicum of effrontery may not easily make out traces of disease for the purpose in question. And having once found or formed these, you are to declare that it is quite unnecessary to seek for causes in any other places, when they are so evident in the place predicted before death. If a further dissection be insisted on, and more morbid anatomy turns up, you are to ridicule the idea of the latter having anything to do with the disease. All other morbid appearances than those which suit your purpose, are to be voted occurrences in the agonies of death.—*Med. Chir. Review.*

II.

DIVISIONS OF SMALLPOX.

THE Medical Gazette has begun again to give us histories of the pro-

ceedings of the London Medical Societies. The following dispute on Smallpox may not be without interest to our readers.

DR. GREGORY stated, that, relying on what he had read and had been taught in lectures, he had entered into practice with the impression that the severity of smallpox was, in the great majority of cases, in the direct ratio of the number of pustules; but that he had soon found other circumstances of more importance than the one alluded to, and had ultimately been led to arrange the different varieties of smallpox under the five following heads:—

1. What he called the *superficial* form of the disease—in which the eruption, whether copious or scanty, was fully developed on the skin with a well-marked scarlet areola round the pock, and with little or no affection of the fauces or air passages. This form always does well, however copious the crop of pustules may be.

2. The *cellular* form, in which the variolous action extends from the skin into the subjacent cellular texture, and in which the glands about the throat, axilla, and groin, become implicated. This extension of the disease is apt to show itself at a late period, giving rise to boils, abscesses, and other mischiefs, which greatly retard convalescence, and occasionally prove fatal. He had known a patient die from an abscess forming under each scapula.

3. The *laryngeal* form, in which the variolous action extends to the mucous membrane of the fauces, larynx, and trachea, interfering essentially with the function of respiration, impeding

the oxygenation of the blood, and being, in consequence, attended with a peculiar claret color of the pustules. The other mucous membranes, as those of the alimentary canal, bladder, vagina, &c., are incapable of taking on the variolous action; but in the larynx it sometimes runs so high as to produce sloughing—a specimen of which the Doctor exhibited. Even the eye, which so frequently suffers from smallpox, Dr. Gregory affirms to do so from common inflammation only; the pustule on the cornea not appearing till the eruption is on the decline, and therefore not being a primary or essential feature of the disease. This form of smallpox is very fatal; the eighth and ninth days being those of danger.

4. Some persons, especially those liable to cerebral affections, die at an earlier period—generally *within* the first eight days. These cases are ushered in by fierce delirium, succeeded by symptoms of effusion into the brain. Corresponding appearances present themselves on examination after death. To this variety the Doctor gives the name of *nervous* smallpox; and he believes it to depend not on inflammation, but on a specific or *variolous* action. That it is not, strictly speaking, inflammation, is rendered probable by the fact of the blood, when drawn at this time, not exhibiting the buffy coat, and by the little benefit derived from bloodletting.

5. The last variety is regarded as depending on the *dissolution* of the blood—marked by petechiæ, passive hemorrhages, &c. From this, Dr. Gregory never saw any patient recover who was not guarded by previous vaccination.

Rather an animated debate fol-

lowed, the general result of which was, that most of those who had seen anything of smallpox, recognized the divisions proposed by Dr. Gregory as correct, and leading to useful practical consequences: still they were not admitted as distinct *species*, nor as having their seat in essentially distinct tissues—or, at least, when any besides the skin and mucous membranes were affected at all, such affections were held to be only common inflammation.

III.

CASE OF THE CURE OF OPEN CANCER, BY THE EXHIBITION OF THE CHLO- RIDE OF SODA.

By THOMAS BUCHANAN, C.M.

SIR,—I shall feel obliged by the insertion in your valuable Journal of the following history of a case of open cancer, cured by (what I presume to be) a new mode of treatment, after other modes had failed.

Jane Spencer, æt. 53, of Burton-Pidsey, in Holdernets, was under my care, about two years ago, for cancer of the right mamma. She had been several years affected with this dangerous and insidious disease, and had applied to various practitioners, in particular to the late Dr. Alderson, who advised extirpation as the only means of saving her life. When she applied to me, the right breast was ulcerated to the extent of about two inches in diameter, including part of the nipple, and extending towards the axilla, with darting pains in the breast, thorax, and armpit. As the patient was determined against any operation, I applied the tincture of iodine over the whole of

the breast, and dressed the wound with the ung. resin. comp. The ulcer healed gradually, but slowly; the pains diminished speedily; and in four days from the first application she was entirely freed from suffering. The parts, when healed, remained considerably indurated, but showed no loss of substance. This woman was one of those patients mentioned in my late work.*

In this state the breast continued nearly twelve months, when, in the beginning of June, 1829, the whole of the indurated parts were thrown off, leaving a foul fetid ulcer of upwards of two inches and a half in diameter, which speedily discharged a quantity of thin, bloody, fetid sanies. All her former symptoms of darting pains in the breast, thorax, axilla, and abdomen, returned with redoubled violence.

The patient continued to have the ulcer dressed with such ointments as she could procure, until it became so nauseous, from the fetid smell of the discharge, as to affect not only her own health, but that of her son, who dressed the wound. In this state she came to Hull, and applied to me, alleging “that as she had found benefit formerly, she felt assured that I could do her good this time also.” Having, prior to this period, frequently used a weak solution of the chloride of soda as a gargle in ulcerations of the mouth and throat, as well as in foul ulcers, I was induced, from these circumstances, to apply this powerful medicine in the case before me, and of the following strength:—

* Essay on the Treatment of Diseased Joints, and the Non-union of Fracture, &c.

R. Liq. Chor. Sodæ 3vi.

Aquæ Distill. 3viii; M. f. Loto.

I dipped a pledget of lint into this lotion, and applied it to the diseased portion of the breast, with directions to keep the parts constantly moist with it; and also to take two tablespoonsful of the solution three times a day.

The following day the discharge was changed to the color and consistence of cream, totally divested of its fetid disagreeable smell. The ulcer healed rapidly; the whole of it was soon covered with healthy skin; forming, however, a considerable depression, occasioned by the loss of substance, as if part of the mamma had been dug out. The cure was completed by the latter part of June, 1829, being little more than ten or twelve days from the time of the first application of the solution of the chloride, and with only six bottles of the above, which were used indiscriminately as mixture and lotion. The patient was employed in the harvest following, and as she expressed it, "wrought in better health and spirits than she had done for these last twenty years."

It may perhaps be asked, that as I lay claim to originality in the mode of treatment, why was this case not published prior to that of Mr. Fielding, of this place? To this I beg leave to reply, that I wished to ascertain whether or not the cure would be permanent; and also to collate a few similar cases before publication, and thereby, if possible, obviate any unfavorable impressions which your late critique on my work might create, where it was remarked—"Mr. Buchanan undoubtedly merits commendation for the zeal he has displayed in

his trials of the medicine (iodine), however divided opinion may be on the results. For our part, we believe the author has been led away by that leaning in its favor, which all men must feel in pursuing a particular inquiry."*

Bearing in mind these circumstances, I therefore abstained from publication on this subject, and waited patiently the result of time, that great test of human discovery, in order to remove any shadow of doubt as to the permanency of the cure. But learning, through the medium of the *Gazette* (No. 92, p. 430), the very excellent cure of an open cancer by Mr. Fielding, I then certainly thought it my duty to lay before you the history of the case.

Enclosed is a note received from my friend Dr. Chalmers, one of the Physicians to the Hull Infirmary, after his examination of the patient, expressing his opinion of the cure. Your insertion of the history of this case in your *Journal*, will much oblige, Sir, &c.—*Med. Gaz.*

IV.

FRACTURE OF THE VERTEBRAL COLUMN
—SYMPTOMS OF COMPRESSION OF
THE CORD—COMPLETE RECOVERY.

EXAMPLES of complete recovery after fracture of the vertebral column are rare; we therefore give insertion to the following, which has very recently occurred in the Hotel Dieu, Paris.

L. Jean-Marie, a mason, aged 28, of sanguineous temperament and robust frame, was admitted at the above hospital Sept. 3d. On the 27th of August he fell

* *Medico-Chirurgical Journal*, Decr., 1828.

from the second floor of a house, and fractured his back at the site of the tenth dorsal vertebra: the existence of fracture was ascertained by M. Berard: the patient had been bled four times during six days, by a medical man who was called immediately after the accident. At the moment of the fall he became insensible, but this state soon passed away, and it was not till the second day that signs of compression were evinced by paralysis of the left inferior extremity, at which time symptoms of inflammation had come on. On his arrival at the Hotel Dieu, he was bled again.

Sept. 4th.—At the visit to-day the fracture of the vertebral column was manifested by a considerable projection of the last dorsal vertebra, which formed a curve of three inches, the convexity of which was towards the right, and, of course, the concavity to the left. No attempt was made to verify the existence of fracture, by producing crepitus, as it was feared by so doing the fragments might be thrown into a less favorable position. The left leg was without sense or motion; the right retained its functions, as did the bladder and rectum. The patient was placed in a position as nearly horizontal as possible, the loins being supported on a hollow pillow. A sheet was folded like a cravat, and passing

across his chest, was fixed to the bars of the bed, so as to retain him in the recumbent posture. During the night (4-5th) he had delirium, with febrile reaction. He was bled to the extent of three palets, and twenty-five leeches were applied in the course of the jugulars.

5th.—The patient calmer, notwithstanding which, a strait waistcoat, which had been put on the preceding night, was retained. He was cupped on each side of the spinal column, at the seat of injury.

7th.—The cerebral symptoms gone, but the paralysis of the left lower extremity continues. Cupping repeated as before.

From this time gradual improvement took place, but the patient was rigorously prevented from moving, and no examination of the fracture ventured upon. By degrees, the sensibility and power of motion returned in the paralytic limb: by the end of September the former was nearly restored, but the latter came more slowly.

Oct. 14th.—The sensibility and power of motion are now nearly the same on the left side as the other: the projection of the vertebræ, though still perceptible, is much less than before. He has not yet been allowed to move from his bed, but his recovery is regarded as secure.—*La Clinique*.

SKETCHES OF PERIODICAL LITERATURE.

ULCERATION OF THE STOMACH.

A REMARKABLE case of this sort is mentioned in the Midland Medical Reporter, which occurred under the

following circumstances:—The patient, a man 50 years of age, had been always healthy until within eight months of the time when he

applied for advice. During this period he had been contracting the habit of drinking considerable quantities of liquor, to which he had previously been wholly unaccustomed. He had lost his appetite, and relished nothing but beer; had no pain, but an uneasy sensation in the stomach, and frequent vomiting. On subsequently noticing the case, it appeared that this vomiting generally occurred from two to three hours after taking food; the matter thrown up was dark-colored, and very offensive. This state of things continued for four or five weeks, when the bowels, which had all along been moved by enemata, became very much constipated, and mechanical means were resorted to for relieving the overloaded rectum. When this object was effected, a remarkable change took place in the symptoms; the uneasiness at the stomach was relieved, and the vomiting ceased. The bowels were afterwards kept open with *ol. ricini*, and the vomiting did not recur; but in the meantime the strength gradually failed, and death occurred nine weeks from the commencement of the treatment.

On examination, the pyloric orifice of the stomach was found very much contracted in size, the substance of the organ in its vicinity thickened, and the mucous membrane ulcerated. The duodenum, for several inches, was in like manner ulcerated and thickened. The substance surrounding the orifice was hard and scirrhus; but above and below, the stomach and intestine were reduced to a pulpy mass, so fragile as to yield to the slightest

force. The colon and rectum were found very much thickened in their coats, and the calibre so much contracted as in many cases to afford scarce a passage for the rectum bougie. The other intestines appeared healthy.

The circumstance most worthy of remark in this case, was the error into which the practitioner might be led under such circumstances, when the vomiting was relieved by the evacuation of the rectum, of supposing the disease in the stomach to be only sympathetic, or at least secondary to that which existed below. The true state of the case was anticipated in a great measure by the medical attendants, but there was certainly room for a mistaken prognosis, which would have been followed by unpleasant consequences.

POISONING.

Two cases which lately occurred in Worcester, Eng., presented symptoms somewhat different from those which are usually induced by the articles taken.—A child, five years of age, had swallowed, as was supposed, a small quantity of sulphuric acid. Being seen immediately after, a quantity of magnesia and lime water was administered, and vomiting provoked by irritating the fauces. This process produced resistance and crying on the part of the child, but after it was over, no farther pain was complained of, and he shortly fell asleep. The state of the mouth and throat, however, gave sufficient reason to suppose that some of the poison had been swallowed; and the medicines were ordered to be continued. Four hours

afterward, he was found asleep, with heavy and sonorous respiration. In the interval he had vomited once. Pressure was made on the stomach, but it could not be ascertained that the slightest tenderness existed there; neither was there any tension or fulness of the abdomen. Six hours after this he died; and on examination, a large portion of the mucous membrane of the stomach was found to be entirely destroyed.

In the other case, a woman swallowed about half an ounce of arsenic in gruel, for the purpose of self-destruction, which she completely effected. Death took place in about four hours. On examination, there was no decided erosion of the ventricular coats, though the internal surface was highly vascular, and appeared to have been greatly inflamed.

LACERATIONS OF THE PERINEUM.

DR. DIEFFENBACH, of Berlin, has suggested a new, and, as it would seem, an improved method of treating these lacerations, when they occur in the worst form; that is to say, so extensive as to produce a communication between the rectum and vagina, and render the patient incapable of retaining the feces. In this state of things, Dr. D. leaves the parts untouched for several weeks, until the patient has recovered from the exhaustion caused by the labor, and has gained sufficient strength to retain for a considerable time a uniform position. The bowels are then perfectly evacuated by cathartics and injections, and afterwards opiates are given to a sufficient extent to secure constipation for eight days.

The first step of the operation is to cut away the indurated edges of the laceration, so that the two surfaces which are to be united may perfectly correspond. The wound is then to be brought together, at the central part, by a strong knotted suture, introduced in such a manner as to pass through the loose cellular texture at the bottom of the wound; two small needles, with twisted sutures, are to be introduced through the lips of the wound, on the vaginal side of the principal suture; the little slit in the rectum itself to be united by two small twisted sutures, introduced with small stitching needles; and lastly, two twisted sutures to be passed through the wound, between the rectum and central suture. The ligatures and ends of the needles must be cut away as close as possible.

All this, however, forms but a part of the operation. The remainder, which is original with Dr. D., consists in making two incisions,—one on each side of the wound,—of equal length, and each slightly concave towards it. The object of this is to take off all tension of the parts which would tend to separate the sides of the principal wound, and to enable them to remain in perfect contact, notwithstanding those movements on the part of the patient which must necessarily be made while the process of union is going on. Bandages, pessaries, sponges, and other mechanical means usually resorted to for keeping the parts in apposition, are by this mode of operating rendered wholly unnecessary.

The treatment consists in the employment of cold poultices, thorough

ablution of the parts, and low diet. On the fourth or fifth day, saturnine lotions are substituted for the poultices, and charpie applied to any surfaces which are suppurating. The lateral incisions require no particular treatment, as they are covered at first by the poultices, and may afterwards be dressed with charpie till they heal up.

In a case operated on in this manner, which is described by Dr. D., every part adhered firmly at the end of eight days, except a small fissure in the rectum, which healed by granulation before the end of the fourth week. The patient, who had been reduced to great misery by the unceasing involuntary discharges of flatus and feces, was thus restored, within a month, to a state of perfect health.

GASTRIC IRRITATION FROM PREGNANCY.

OF all the constitutional affections produced by the pregnant state, none perhaps produces greater distress than the obstinate vomiting which so frequently accompanies its early stage. A case is mentioned in a late journal which resisted the suc-

cessive use of effervescing mixtures, cathartics, enemata, calomel, laudanum in various combinations, venesection, local bleeding, blisters, and finally hydrocyanic acid, all which were administered in the space of eight days. The acid produced a cessation of the vomiting for three hours, after which it returned with equal violence as before. The disease appeared at last to subside spontaneously, the stomach having reconciled itself to the new state of things in the system. The pregnancy went on well, and the patient, in due time, was delivered of a healthy child.

ANGINA PECTORIS.

THE most common view which is taken of the proximate cause of this disease, is that which attributes it to ossification of the great vessels of the heart. In a case lately reported in a foreign periodical, the heart was found, on dissection, to be healthy, but the liver was extensively diseased. Such are the uncertainties of medical science. If all diagnoses of diseases could be subjected to this test of after-examination, we might hope for a material improvement in this important department.

BOSTON, TUESDAY, JANUARY 5, 1830.

NEW WORK.

AMONG the medical productions recently from the English press, is a work in three parts, by MICHAEL WARD, M.D. S.R.C.S.L., *late Surgeon to the Manchester Infirmary, &c.* The sum total of the contents

of this work is, that burns and scalds may be cured by common wheat flour. If the reader were to peruse the whole of Dr. Ward's learned production, he would get just as much information as is contained in these few words,—and, we may add, no more. The same fact he has been

apprised of for many months, through our own pages and those of every medical Journal, and almost every newspaper in this country and Great Britain. In speaking of this work, the English reviewer very pointedly remarks :—

“In typography, it is the most curious intermixture of Roman, capitals, and Italics, we have ever witnessed ; and in medicine, the most felicitous blending of cases, comments, correspondence, notes, corrections, and commendations, that can possibly be imagined,—a model of scientific arrangement, and monument of professional ingenuity. There is literally nothing new in it, and yet, *mirabile dictu*, that nothing is divided into three parts.”

PHTHISIS PULMONALIS.

A CIRCUMSTANCE attending this disease, which has perhaps attracted less notice than its importance deserved, is the inflammatory process which occurs previous to its fatal termination in the mucous membrane of the alimentary canal. The occurrence of aphthæ within the mouth and throat, in the last stage of phthisis, is a familiar fact ; but the extension of the morbid action to the stomach and intestines is not generally alluded to as a probable occurrence in this stage, by those who have treated of the disease. A circumstance which might lead us to suspect this to be the case, is the frequent occurrence of severe and obstinate diarrhoea at this period. In the examination after death of phthisical patients, a diseased state of the intestines is very frequently noticed. We have had our own attention called to this fact very recently, by wit-

nessing the post obit appearances in a female patient who died with diseased lungs, and in whom the organs were found tuberculous. The intestines exhibited a succession of ulcerated passages, of considerable size, through nearly their whole extent. Yet the symptoms during life were referred wholly to the lungs ; and there were no more than the usual reasons for supposing that any disease existed elsewhere. This point of pathology deserves, we think, a fuller investigation than it has yet received.

There is still another fact which is seldom, we believe never, noticed in standard works on consumption, and which might be considered in connection with that to which we have alluded. Even in the early stages of this complaint, a paroxysm of coughing is often induced by taking food, and continues till the food is rejected. Where this has occurred, we have never known a recovery to take place ; so that when, in conjunction with the usual symptoms, this has been observed, it appears to us, more decisive of the fate of the patient than any one circumstance so early in the history of the disease.

CATARRHAL COUGH.

THE consequence of taking many of the advertised Essences, Elixirs, &c., containing alcohol, opium, and a stimulating essential oil or gum, in producing inflammation of the pleura and lungs, and general fever, have proved so serious, that at this period of the year we consider it our duty to caution our readers against such dangerous articles, and to recommend to them the composition of the in-

spissated white juice of the garden lettuce, extract of liquorice, gum arabic, tolu, &c., first introduced into practice by Professor Duncan, under the name of Lettuce Lozenges; which, by promoting expectoration and perspiration, allaying irritation in the internal membrane of the windpipe, and abating fever, speedily remove both the cause and effects, and which, at the same time, under any circumstances or condition of the system, are incapable of doing mischief. In all the elixirs, essences, tinctures, &c., advertised as infallible remedies for cough,—and we believe we have analyzed nearly all of them,—we have detected opium, combined with an aromatic, and alcohol. The opium allays the irritation in the windpipe, but by checking expectoration and disturbing the nervous system, they occasion congestion of the vessels of the lungs, &c., excite fever, and thereby often convert a simple case of catarrh either into pleurisy, inflammation of the lungs, or inflammatory fever. Trusting to the false promises of the unprincipled proprietors of certain cough-drops, elixirs, &c., many thousands have continued their use till disease has taken place in the lungs, which lays the foundation of fatal consumption. *Gazette of Health.*

Incipient White Swelling.—Mr. Bayle has published a case of “Incipient White Swelling,” in which the tincture of iodine, administered in the dose of twenty drops twice a day, in a wineglassful of water; and

the application of a liniment composed chiefly of a solution of iodine, as the following, succeeded in effecting a cure:—

Take of Barbadoes Tar, two drachms;
Iodine, twenty grains;
Oil of Almonds, two oz. Mix.

To be gently rubbed over the affected joint every night and morning, or three times a day.—*Id.*

Retention of Urine.—Mr. Wakley relates a case of retention of urine which lately occurred in St. Bartholomew's Hospital, under the care of Mr. Earle. The patient had suffered very much from stricture of the urethra for about twelve months, which continued gradually to advance till he was only able to evacuate the bladder by drops. During his confinement in the Hospital, a complete retention took place, and the bladder becoming enormously distended, with symptoms of inflammation, Mr. Earle made several efforts to introduce a catheter; but finding it impracticable, he punctured the bladder *above the pubis*, when about three pints of thick unhealthy urine escaped. He soon became much easier. The next day he was considerably better, after which the pain &c. continued gradually to decrease, and the urine to pass freely through the catheter.—*Id.*

Variola.—The smallpox is prevailing at Quebec, and the varioloid disease, it is said, is not an uncommon occurrence.

WEEKLY REPORT OF DEATHS IN BOSTON, ENDING DECEMBER 26.

Date.	Sex.	Age.	Disease.	Date.	Sex.	Age.	Disease.
Dec. 20.	F.	18 mo	hooping cough		M.	50 yrs	unknown
	F.	2 yrs	burn		M.	11 mo	lung fever
21.	M.	23	suicide	24.	F.	18	measles
	M.	29	consumption		M.	23 yrs	dropsy on the brain
	M.	18 mo	unknown		F.	80	old age
22.	F.	4 yrs	croup	25.	F.	57	liver complaint
23.	M.	21	consumption	26.	M.	9 mo	dropsy in the head
	M.	26	nervous fever	Males, 9.—Females, 6. Total, 15.			

ADVERTISEMENTS.

NEW MEDICAL BOOKS.

JUST published, and for sale, by **CARTER & HENDEE**,—Malaria; an Essay on the Production and Propagation of this Poison. By **JOHN McCULLOCH**, M.D. F.R.S., &c. &c.

An Essay on the Diseases of the Internal Ear. By **I. A. SAISSY**, M.D. Translated from the French, by **NATHAN R. SMITH**, M.D., Professor of Surgery in the University of Maryland; with a Supplement on Diseases of the External Ear, by the Translator.

Observations on the Utility and Administration of Purgative Medicines, in several Diseases. By **JAMES HAMILTON**, M.D., Fellow of the Royal College of Physicians, &c. &c. From the Fifth Edinburgh Edition.

A Treatise on Pathological Anatomy. By **WILLIAM E. HORNER**, M.D., Adjunct Professor of Anatomy in the University of Pennsylvania, Surgeon at the Infirmary of the Philadelphia Almshouse, Member of the American Philosophical Society, &c.

Elements of Operative Surgery. Translated from the French of **A. TAVERNIER**, Doctor of Medicine of the Faculty of Paris, &c., with copious Notes and Additions. By **S. D. GROSS**, M.D.

MEMORIA MEDICA.

THIS day published by **CARTER & HENDEE**, corner of Washington and School Streets, *Memoria Medica*,—a Medical Common-place Book,—with an alphabetical Index of the most common terms occurring in practice. Carefully selected and arranged by a Fellow of the Massachusetts Medical Society.

From **Dr. James Jackson**, Professor of the Theory and Practice of Medicine in Harvard University.

Gentlemen,—I have examined the "*Memoria Medica*" which you sent to me. I think the plan of it very excellent, and that it will be found highly useful to practitioners and students of medicine. I have never believed that a voluminous common-place book can be very beneficial to any man, unless he means to become an author. But on the other hand, every one will find an advantage in keeping a common-place book in which he may notice the detached facts which

come under his notice, and which are likely soon to be lost from his memory. The book you have prepared will be found well adapted for this purpose by medical men, and will be more likely to be used by those who procure it than a common blank book, because all the labor of arrangement is saved.

I am, gentlemen, your obedient servant,
JAMES JACKSON.

From **Dr. Walter Channing**, Professor of Obstetrics and Medical Jurisprudence in Harvard University.

I have examined the *Medical Common-place Book* which was left with you this evening, and with pleasure offer you my thanks for the publication of so useful a volume. Every practitioner of medicine will agree with the remarks in the preface on the inconveniences and absolute loss of what is very useful, which result from depending solely on the memory. Not infrequently it happens that some particular prescription is peculiarly suited to an individual. Some time passes, and an occasion again arises in which we believe that the same medicine might be equally beneficial; what it was, however, has wholly escaped us; and though something else may be equally useful, still some regret may be felt, at least by the patient, that what has been found beneficial cannot again be at once resorted to. Some object to an artificial method of preserving, for such and other uses, what may be safely trusted to the memory, if that faculty be faithfully cultivated. I am willing to admit that there is force in this objection; but it is a simple question of fact only we have to consider. If it be true that there is much lost to the individual, and certainly much more to the profession, by trusting entirely to the memory, the occasional use of the *Common-place Book* for the preservation of what is truly valuable, has all the recommendation it needs. For such purposes, viz., for the registering of cases the most rare, and the frequent, if important, epidemics, prescriptions, &c., your *Memoria Medica* promises to be very useful; and for these it well deserves to be recommended to physicians. Students attending hospital practice will find it very valuable. Its tables of names are very full, and under references very easy. I cannot but hope it will get into general use.

Yours, &c., **W. CHANNING.**
Dec. 8.

Published weekly, by **JOHN COTTON**, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

VOL. II.]

TUESDAY, JANUARY 12, 1830.

[No. 48.]

I.

CATARACTS ALTERNATING WITH DIABETES.

[This paper furnishes us an example of that alternation of different organs in morbid affection, the precise pathology of which is so little understood by the profession.]

THE following is a very singular case, and one that would be met with incredulity, were it not guaranteed, as it is, by the name of the Surgeon and of the Hospital.

Eliza Broomfield, æt. 15, remarkably tall and thin, was admitted into the Winchester County Hospital with cataract in either eye. The pupils were dilated to their utmost, and the crystalline lens was evidently so augmented in bulk as to protrude through the pupillary opening; its color was uniformly milky; the cornea unusually glassy; the vision so completely lost that the patient could only distinguish most imperfectly light from darkness. Independent of the cataracts, there were dyspnoea, cough, and loss of appetite.

The cataracts had appeared simultaneously fourteen months previous to her admission, and had been completely formed in the surprisingly short period of twenty days. The menses had appeared at the age of eleven, and flowed with regularity till her thirteenth

year, when they disappeared. From having been healthy and robust, she now became very debilitated, increased most astonishingly in stature, and subsequently was attacked with profuse nocturnal perspirations. When twelve months had elapsed, an evident amendment took place, but it proved to be temporary only, and very shortly afterwards the girl began to complain of uneasiness about the head, with vertigo, confusion, and obscurity of vision.

R. Infus. gent. c. 3i.

Spt. Æth. Nit. 3ss.

Tr. Camph. c. 3ss. ter die sumend.

Pil. Hyd. gr. ij. omni nocte sumend.

These medicines were continued for upwards of a fortnight, with considerable benefit; and on the 20th of February we find that, though the cough was nearly gone, the dyspnoea and appetite were worse. The dilatation of the pupils, bulging, and milky whiteness of each lens were diminished, and the patient could readily detect any substance interposed between her and the light of a window. The medicines were repeated, with the addition of an aperient. On the 24th she could discern the flame of a candle at some little distance, but it was now discovered that the urine was too abundant.

"Feb. 28th.—The quantity of

urine passed for the last four days has averaged sixteen pints daily. Its color of a greenish yellow, and its taste strongly mellitic. Pulse 65, and feeble; appetite natural; dyspnoea not diminished; the emaciation very considerable; tongue morbidly clean; skin dry and scurfy. The cataracts are rapidly disappearing. Ordered to subsist exclusively on animal food, and to substitute the following medicines for those which the patient has been taking:—

- R. Sulph. zinci, 3 ss.
 Ext. cinchonæ, 3 iss. ft. pil. xxiv.
 sumat. ij. ter die c. haust. sequent.
 R. Tinct. opii, gtt. vi.
 Decoct. cinchon. 3 i.
 Conf. aromat. ʒi. ft. haustus.

"March 3d.—Urine passed the two last days, thirteen pints and a half; pulse 72: the cataracts have totally disappeared, and the patient's visual powers perfect, being enabled to employ her needle with perfect ease. Continue medicines and diet.

"9th.—Urine has decreased to nine pints;—pulse 94;—the dyspnoea has very much abated, and there is a decided amendment in the patient's strength. Continue.

"14th.—Urine eight pints; pulse 88.

"18th.—Urine seven pints; pulse 96.

"25th.—Urine two pints, and natural in respect to color and taste; pulse 80. The sole complaint appears to be extreme debility. The patient having regained her sight, and having been relieved of her diabetic symptoms, she became anxious to return home to her friends. She was accordingly

discharged, with an injunction to come back to the Hospital, should any of her former symptoms recur.

"May 10th.—Intense interest, as might naturally be expected, was excited with respect to the probable issue of this extraordinary case, which did not in the least subside after the departure of the patient from the house. Frequent opportunity was, fortunately, afforded of inquiry concerning her, from a relative who resided in an adjoining house, and who visited the Hospital once a fortnight as an out-patient. From this person the following report was obtained, and has subsequently been confirmed by the testimony of the mother of the patient.

"From her narrative, it appears, that almost immediately (about four days) after the young woman had returned home, she began to experience a relapse of uneasiness about the head, accompanied with great obscurity of vision, which increased with such rapidity, that, before a week had elapsed, she was in a state of utter darkness. To this pitiable condition succeeded her diabetic symptoms, but in a more aggravated form than in her previous attack, together with rapid emaciation, and overpowering debility. The quantity of urine evacuated for several days prior to her decease, averaged at twenty pints per diem; but, with the accession of these symptoms, there was a complete restoration of the natural functions of the eye, which she retained most perfectly to the last moments of her existence. Her death took place four weeks after the return of the diabetes. There had been no post-mortem examination."—*Med. Chir. Rev.*

II.

DROPSICAL EFFUSION.

[The following article is one of several cases recently laid before the public, which lead to the conclusion that dropsical effusion is more often the effect of disease in the kidney than usually suspected. It should remind us to hold the probability of such cause always in view, in the examination of hydropic patients.]

FRANCIS MAGEE, aged 57, a weaver, at the time of his admission into the infirmary, on the 5th of August, 1828, had been affected for three weeks with considerable œdema, and some swelling and firmness of the belly. He had also occasional vomiting in the morning, and dull pain on pressure in the pit of the stomach, and along the margin of the ribs on the right side. He had likewise frequent cough, with difficult expectoration of tough opaque mucus, and considerable difficulty of breathing. The chest sounded loudly everywhere, on percussion; and both acts of respiration, but particularly expiration, were prolonged, inspiration being also indistinct, expiration distinct, sonorous and sibilant. The pulsation of the heart could not be felt with the hand, when he lay on the left side; and with the stethoscope, both sound and impulse were feeble. The pulse too was feeble, and only 52 in the minute. The tongue was furred, and the breath fetid; the bowels required the frequent use of laxatives; the urine was of natural quantity, but exceedingly pale, being of the lightest possible straw color, and depositing a moderate quantity of white flakes, when heated.

His pectoral complaints were of eight years standing, and began

subsequently to the healing of an old ulcer on the leg, which had been occasionally healed, though only for a few weeks at a time, during twelve years previous to its final cicatrization. About a year before his admission into the hospital, his breathing got worse, so as to annoy him when at work. About that time he had also a comatose attack, which lasted a day, and was removed by blood-letting. After that, his urine had been always pale, but natural in quantity. For two months before he entered the hospital, he had pain in the loins, difficulty in passing urine, and frequent attacks of vomiting.

He was ordered ten drops of tincture of digitalis, thrice a day, in an ounce of infusion of cassia, and likewise a mercurial pill every evening. Laxatives were also given from time to time. On the third day of this treatment, the urine was 104 ounces, and had a specific gravity of 1007.9. The œdema was lessened; and the action of the heart, both to the hand and to the stethoscope, was natural, though rather feeble. On the 11th of August the œdema was gone, the ascites nearly so; but his breathing was as laborious as ever, and he complained of pain round the whole lower margin of the chest, particularly in the loins, where pressure made the pain shoot towards the stomach. The digitalis was discontinued, and a squill mixture ordered in its place.

From this time the urine began to decrease in quantity, till on the 16th it was only 40 ounces daily. Its specific gravity was 1008.4; it was as colorless as ever, coagulated more abundantly when heated, and contained very little urea. There was no return of

the dropsical swellings, but his difficulty of breathing and cough were not in the least relieved. Next day the breathing was worse. He also became affected with headach, drowsiness, contracted pupil, some livor of the face, and tremors of the hands. The pulse was 60 and full, and the tongue brown on the centre. Fourteen ounces of blood were therefore taken from the arm, with some relief to the dyspnœa; and the blood was very buffy in one cup. The squill was now abandoned, and the digitalis resumed. On the 18th, the symptoms connected with the affection of the head were rather increased, and he was feeble and much exhausted. The urine was only fifteen ounces. A brisk laxative and a purgative enema were ordered, leeches were applied to the temples, and subsequently a blister to the head; but without any advantage. His stupor and tremors got gradually worse and worse; he complained of tenderness over the whole belly: the urine on the 19th was only twelve ounces; on the 20th, twelve ounces were withdrawn by the catheter. On the morning of the 21st, he died.

The whole quantity of urine passed during the last thirty-six hours of his life was two ounces. This had precisely the same external qualities as the urine previously passed, but had rather a higher specific gravity, namely, 1009.5.

Inspection.—There was very little œdema of the limbs. The face was not livid, and the scalp was free of blood. The sinuses of the dura mater contained only a moderate quantity of blood; the

arachnoid and pia mater, as well as the substance of the whole brain, were remarkably destitute of blood, and blanched. There was not above half a drachm of fluid in each lateral ventricle, and half an ounce in the base of the skull. Even in the base of the brain the vessels were unusually empty of blood. The cortical matter of the brain appeared less in thickness than natural. In the middle of the left *thalamus*, half an inch behind the anterior commissure, there was a cavity which would have held a cherry-stone; it was crossed by filaments of cellular tissue, wall-ed in by a thin partition of condensed cerebral substance, but not surrounded by redness or softening.

The pericardium and base of the left lung adhered to the pleura of the ribs by very old adhesions; and four ounces of clear serum were contained in the pleural sac of that side, but none in the pericardium. The posterior part of the lower lobe was very œdematous. The walls of the left ventricle of the heart were somewhat thickened, and its cavity contracted. The aorta was slightly and uniformly enlarged at the arch, and its whole inner membrane thickened, hard and wrinkled,—the valves being also involved in this change of structure. On the surface of the right lung there were many old adhesions to the ribs; and in its substance a great deal of œdematous infiltration. The fore part of both lungs was grey, strongly crepitant when handled, and slightly emphysematous,—the whole air-cells being somewhat enlarged. The nature of their structure in the posterior part could not be

ascertained, on account of their state of infiltration. The greater bronchial tubes were filled with mucus. The blood was everywhere black and fluid.

The stomach and intestines were healthy. The spleen was of a pale reddish-brown, firm, and composed of little radiated masses,—not unlike the mineral Wavellite in appearance. The liver was somewhat larger than usual, but in structure perfectly healthy. The kidneys were both much diseased; the right was rather less than natural, externally rough with small irregular modules, and of a pale greyish-brown color,—internally of a pale greyish-yellow tint. The *tubuli uriniferi* were much nearer the surface than in the healthy kidney, greatly diminished in size, and pushed as it were outwardly, by a deposit around the pelvis of greyish-yellow, indistinctly granular matter; into which also the whole cortical substance was converted, so as to have lost its usual fibrous appearance. Even the fibres of the *tubuli* were unusually pale, and the yellow matter was deposited among them. The pelvis of the kidney was small, the ureter pervious. The left kidney was much diminished in size, flattened and flabby. Its cortical substance was in the same state as that of the right kidney, but rather darker, and with a few distinct tubercles; and some grains were softened. The tubular portion was of a dark brownish-red color, and not fibrous at all; and it contained several small watery cells, apparently the remains of the infundibula. The ureter was pervious. The capsular fat of both kidneys was indurated, and the tunica

propria thickened and adhering.

Analysis of the Blood.—About an ounce of blood was collected from the vena cava, by an incision in the loins, great care being taken to keep it clean and pure. It was black, fluid, and nearly free of the odor of putrefaction. It was heated in a vapor bath, at a temperature a little under 212, and rapidly stirred as soon as it began to coagulate. A thick, brownish-red, granular mass, being thus formed, a little distilled water was added; and after agitation, the whole was filtered. A cherry-red fluid passed through, which, at 212 deg., deposited more brown flakes, and became wine-yellow in color. This was evaporated nearly to dryness in the vapor bath, at a temperature beneath 212 deg., during which a fetid odor was exhaled, exactly the same as that of the patient's breath during life. Just before the fluid began to acquire a syrupy consistence, a drop of it was treated with nitric acid, which rendered it opaque, and caused considerable coagulation; but crystals were not formed. The syrupy extract, when acted on by boiling alcohol, gave a pale wine-yellow solution, which was evaporated in a small glass vessel till it began to thicken. This extract had the same setor.

On the addition of a few drops of nitric acid, the same odor was exhaled from it as from extract of urine, when similarly treated; and immediately fine, greyish-red, flaky crystals, of a pearly lustre, were formed in abundance, so as to thicken the whole mass. These were evidently scales of nitrate of urea.—*Lond. Med. Gaz.*

III.

DIFFICULTY OF SWALLOWING FROM
DISLOCATION OR DIASTASIS OF THE
CORNUA OF THE OS HYOIDES.

SAUVAGES, in his nosology, has given the name of the dysphagia of Valsalva to the difficulty of swallowing arising from this cause, which was first described by the latter author. Since his time, Borsieri and Molinelli have recorded several cases of the affection in question, sometimes occasioned by external violence, sometimes from swallowing large morsels of food. Dr. Gio. Bat. Magna has recently published a similar case in the *Annali Universali di Medicina*, of Milan, for November and December, 1828, of which we shall make a short abstract.

A man of sixty, extremely meagre and flabby, whilst endeavoring to swallow a large piece of the tendon of beef, thought he felt it stick in his throat, and made many attempts to get it down, without being even able to swallow his saliva. Each unsuccessful effort was accompanied with a peculiar noise of air gurgling up the œsophagus, but respiration and the power of speech were free. Nothing could be seen or felt about the pharynx or neck, and a bougie passed readily down the œsophagus, without encountering any obstacle or procuring any relief. The painful spot being precisely the region of the os hyoides, and no foreign body being lodged there, Signor Magua imagined that dislocation, or rather diastasis, of the appendices of the os hyoides itself, might be the cause of all the symptoms. He accordingly passed down, behind the base of the tongue, the fore and middle fingers of the right hand, and moved the

os hyoides in the manner recommended by Valsalva and Sauvages, whilst the left hand was applied on the bone behind. Immediately the uneasy sensations experienced by the patient in the spot disappeared, and he was able to swallow water with ease.

Two years afterwards, a similar accident happened from taking a large mouthful of hard cold boullie, and was remedied by similar means. *Med. Chir. Rev.*

IV.

Communicated for the Boston Medical and Surgical Journal.

Some Account of Affections of the Face, considered in Relation to the Appearance of a new Disease of this Part, designated, by Dr. Jackson, Gangrænopsis.

By R. A. MERRIMAN, M.D.

THREE cases of Gangrænopsis have come under my observation within the last three years.

CASE 1st:—The first was a little girl about ten years old, who had taken, in the course of ten days, four cathartic doses of calomel, repeated once in two or three days. She was so unfortunate as to fall into the hands of two of the fraternity without consultation, which is always a misfortune to the patient, because it is impossible for one to know the doings of the other very accurately. When I first saw her, the swelling and soreness of the mouth were called canker. The swelling of the parts about the mouth progressed uninterruptedly to gangrene and sphacelation of both lips, and the greater part of the right cheek, before her death, and left such a hideous spectacle in the countenance of the child, as made it de-

sirable she might not survive. Our wishes were realized.

CASE 2d.—The second case was a man about fifty years old, who followed the coasting business from this place to Boston. He thought the complaint was caused by shaving off a pimple, and taking cold. This patient had taken no mercury. When I first saw him, he had been under the care of Dr. — a short time. The face had very much the appearance of that of the little girl, excepting it was more confined to one side of the lips and one cheek. The disorder progressed to sloughing and separation of a portion of the cheek to the bigness of a dollar, near the angle of the mouth. The wound healed readily, leaving a large contracted scar.—This was the only fortunate case of the three. The treatment was similar to the others, principally local, the fermenting poultice, charcoal, and the steams of vinegar. The system did not appear to suffer very materially.

CASE 3d.—The third case was that of a servant girl, about whom there could not much be known. She was about sixteen years old, and it was supposed, by those immediately acquainted with her, that she had taken something for the purpose of interrupting a supposed pregnancy. On account of the swelling of the organs of speech, she could not speak intelligibly when I first saw her, about five days before her death. The swelling was great, had been rapid, and continued rapidly to increase and extend; at my first visit, it was confined to the lips, mouth and left cheek. The whole neck above and some below

the clavicles at last was affected. Whether this patient had or had not taken any preparation of mercury, I could not ascertain. Gangrene had commenced a day or two before her death.—No remedies had any apparent effect in this case; she appeared to die from suffocation.

These cases occurred in the same neighborhood, within 150 yards of each other, in three successive years. The first case, the little girl, was connected with a poor family; the other two had all the comforts of health and sickness.

Since writing the above, two other cases have come to my knowledge. One, a girl about eighteen years old, who lived out of town, and was not seen by my friend Dr. Flagg, till three days before her death. This was very much such a case as my third,—the family suspecting that she had taken some means to procure abortion. The other was one to whom much mercury had been given, and pursued for a considerable time, in small doses, and even after profuse ptyalism had been established. This patient was a sea-faring man, about forty years old. His mouth and face swelled; he could not distinctly articulate for several months; his teeth fell out; and portions of his lower jaw, including the sockets of the teeth, came out. At the end of nine months he died, either of the original, or instituted disease.

In the year 1813, typhous fever prevailed in the part of the country where I then was practising. I recollect that in two protracted cases where mercury had been given in small doses for

a number of weeks, the cheeks were affected, as I supposed, with the medicine. In one, a small perforation, near the angle of the mouth, about the bigness of a dime, sphacelated and separated, without any swelling or inflammation; and this happened some time before the patient, a young lad, died.—The other case was a lady between fifty and sixty, who had swelling and inflammation in the neighborhood of the parotid gland. A large portion of the cheek sphacelated, and left an opening the bigness of a dollar, through which her food and drink flowed for some time. This patient recovered, and the wound healed, contracting the cheek and drawing her mouth on one side.

Other instances of sudden and unusual swellings about the mouth and face have occasionally arisen, which have subsided without making a lasting impression on our memories. A case happened in this town three years ago, where the tongue of a child eight or ten years old swelled beyond the boundaries of the mouth, and so continued for ten days, accompanied with much dropping of saliva. This case was unattended with much disturbance of the system.

When I first saw Dr. Jackson's account of "Gangrænopsis" in the Medical Recorder, I felt as though there might be some doubt about the specific character of the disease in most of the cases which he enumerated,—that they might have been the legitimate effects of mercury: a doubt which Dr. Jackson has more than hinted. It cannot be disguised, that the action of this most powerful weapon against disease, produces

sometimes very disastrous effects. It has fallen to my lot to witness these effects too frequently; and it must be confessed that we are all sometimes surprised at the sudden and accumulated effects of this medicine: but, of the severe cases related in this paper, in one certainly, the second case, no mercury had been taken. This was a very severe, but successful case;—and it is most probable that in two others, the third and fifth, none had been taken. In Dr. Jackson's cases, the most of them had taken mercury. Dr. Webber, in the Journal of Science, has not even appeared to suspect that mercury may have been the cause of the complaints. Only two of his cases appear to have been very severe. In these, one was established on his first visit, and amended under the use of mercury; in the other, mercury had been given. In the other two it is likely, agreeably to his custom, calomel had been given.

In Dr. Brown's case mercury was given, though several weeks previous to the appearance of the swelling. I have never observed anything like a mesial line marked in this disease, though most of the swelling has been on one side, but not confined to it. In the first case here related, the little girl, the sphacelation included all the lips and one cheek. The disorder has not been confined to children.

I have thought that these affections may be accounted for without considering them *sui generis*, or, that a new disease is making its appearance. The face and parts about it are peculiarly liable to sudden swellings and inflammation. These swellings are not only sudden, but very great,

so as entirely to obliterate the distinguishing features of the individual. The tongue is liable to these sudden swellings; carious and diseased teeth produce them; the whole face is frequently so swelled from exposures to vegetable poisons, as they are called, and the stings of poisonous insects, that the features of the individual are not recognizable. These swellings most generally go off by resolution. This peculiar diathesis probably is more susceptible in children than in more mature life. This aptitude to inflammation and swelling may be brought into action by various exciting causes; such as carious teeth, vegetable and animal poisons, and, as in one of the cases above related, by shaving off a pimple in taking off the beard, and by mercury.

In the first case related in this paper, we were satisfied that the gangrenous erosion was caused by the operation of mercury. The case was supposed to be one of debility or atrophy, where worms had become troublesome. Cathartic doses of calomel were directed once in two days, and observed till four doses were taken: the patient then was visited by Dr. —, without any knowledge of medicine having been prescribed previously, or taken; calomel was again prescribed, and upwards of one hundred lumbrici were discharged from the bowels a few days previous to the child's death. In this case, the patient evidently took a double portion of mercury. I would here too remark, that the lips both of old and young are subject to eruptions, but more particularly in young; and they may be more liable to the specific action of mercury in

young subjects than older, and more perhaps than other parts of the face.

Marblehead, Jan. 1, 1830.

V.

Communicated for the Boston Medical and Surgical Journal.

ANEURISM OF THE TEMPORAL ARTERY SPONTANEOUSLY RELIEVED.

By EBERLEER STONE, M.D.

In the spring of 1827, while visiting a lady sick of a long fever, she showed me a tumor upon the scalp, near the foramen in the parietal bone, which, on examination, proved to be an aneurism of the temporal artery, of the size of a walnut. It pulsated strongly, as did the different branches of the temporal artery, which were enlarged and tortuous, spreading over the whole side of the forehead. She informed me that the tumor took place while she was sick, some time before, of a fever attended with severe headach.

It remained stationary till the summer of 1828, when it enlarged and became more troublesome, interrupting sleep, by the throbbing pain. Pressure was now tried, with temporary relief. The distress, however, occasioned by the aneurism was so great, that an operation was proposed and consented to. But, in the mean time, she was seized with pneumonia, attended with a violent cough, which produced great pain in the tumor. Inflammation took place, so that the side of the head was much swollen, and the eye became œdematous. But, on the subsidence of the inflammation, we were surprised to find that the varicose arteries had disappeared, and that the tumor

had lessened one half in size, and become quite firm. I have examined it often of late, and have been constantly informed that it gave no uneasiness. The arteries in the neighborhood are neither

enlarged, nor do they discover any undue action. There is still a small firm tumor, in which, by pressure, you may discover deep-seated pulsation. •

Walpole, Jan. 1, 1830.

SKETCHES OF PERIODICAL LITERATURE.

ULCERATION OF THE STOMACH.

WE mentioned, in a late number, a case of recent occurrence, in which death followed the taking of a large quantity of arsenic, but no trace of erosion was found in the gastric coats. A question of considerable interest in connection with this subject is, how far the existence of such erosion, or of ulceration in this organ, is to be taken as a proof of poison in suspected cases. That ulceration and even perforation of the stomach may happen from disease, is by no means a new discovery; but we believe the frequency of its occurrence would scarcely have been suspected, had not the investigations of some late pathologists particularly directed the attention of the public to the subject. It appears from these researches, that perforation of the stomach is often found in connection with, and as the sequel of, cancerous ulceration of the organ. These cases are usually of long continuance, and in their progress towards a fatal termination, produce various degrees of irritation in the part. In another class of cases, the disease has commenced in common inflammation, either of the mucous coat of the stomach on the one hand, or of the neighboring portion of pe-

ritoneum on the other. In many of the cases of this class, the disease of the stomach has been complicated with peritonitis; and this has particularly been noticed in women who have died of the disease after childbirth. In other cases, no inflammation could be discovered in the abdomen, and in some, even the part around the perforation appeared healthy.

The principal circumstances of difference, which distinguish the action of caustic poisons on the stomach from that of the causes above alluded to, are the following:—When perforation has been produced by poison, the edges of the opening are usually thickened, or at least of the same thickness as the rest of the organ; when, on the contrary, this has resulted from inflammation, the internal tunics are usually found to have yielded to a greater extent than the serous membrane, and the edges are thin. In the former case, the form of the opening is very irregular; in the latter, much less so. The color of the edge, from nitric acid, is usually yellow; and from the sulphuric, black. The state of the mouth, fauces, and œsophagus, when corrosive poison has been swallowed, also furnishes an important indica-

tion. The parts of the stomach in the vicinity of the perforation are also usually inflamed; but this circumstance, as we have seen, cannot be depended on.

It is however to be considered, that the cases in which the physician is called on to decide as to the proofs of poison, always involve the character, and usually the life of survivors; and however useful the above indications may be, as furnishing just ground of suspicion and farther examination, he would probably hesitate to assert, from the appearance of any or all of them, that poison was certainly the cause of death. The only safe ground on which to rest this conclusion, is the actual detection of the poisonous substance; and fortunately, in the majority of cases, this detection may be effected by chemical agents. Convictions may indeed take place where this species of proof cannot, from the circumstances, be obtained; but this will of course require the aid of other evidence, for the accuracy of which the medical man, as such, is not responsible.

OPHTHALMIA OF INFANTS.

WE quoted, in one of our late numbers, an opinion expressed in a foreign journal, that this disease was frequently connected with, and probably owing to, a morbid uterovaginal secretion in the parent. We see that a similar view of the subject is adopted by Dr. McKenzie, of the Glasgow Eye Infirmary. In his view, it is by no means necessary to the communication of disease from the parent, that it should be venereal

in its character. In a very large proportion of the cases in which the ophthalmia occurs, such an origin cannot be suspected. In many of these, however, a leucorrhœal discharge is known to exist; and it may fairly be presumed, that this is its true origin in the majority of all the cases which occur. Ophthalmia, indeed, is not the necessary consequence of this state of things, and may almost certainly be prevented by seasonable ablution, and a due regulation of heat and light. Where, however, the eye has been inoculated with morbid matter, and subsequently neglected for half an hour or more, exposed in the interval to a strong light, or to a draught of air, the disease can scarce fail to follow. That this species of neglect too often occurs through the carelessness of nurses, we are well aware; and the attention of the obstetric practitioner cannot be too often or too forcibly called to its inevitable consequences.

If the first production of this malady is thus often chargeable to the neglect of the nurse, its subsequent treatment implies, sometimes at least, a want of care and reflection on the part of the practitioner. It is an idea sometimes expressed and often entertained, that the diseases of infants are not to be benefited by any active treatment; and that where the restorative processes are to occur at all, they occur spontaneously. To a very considerable extent, this is undoubtedly true. Nature is mindful of the wants of her children, and most of those in regard to whom the resources of art are most limited. It is true that infants recover from

disease with very little interference from art, and with the exhibition of the simplest medicinal agents; but this fact neither offers any argument for neglect, nor for the omission of any remedy which is clearly indicated by the circumstances of a particular case. Above all, where disease occurs in an organ like the eye, which is open to inspection, every stage in its progress ought to be carefully noticed; and where, for want of this attention, as has sometimes happened, extensive deep ulceration has been permitted to take place unchecked, the attendant is justly chargeable with the violation of a sacred duty, and is without excuse.

In his views of the treatment of this disease, Dr. McKenzie does not materially differ from the author we have already quoted. The best collyrium for washing away the purulent discharge, according to him, is a solution of a grain of murias hydrargyri in eight ounces of water. This is to be applied not only to the eye itself, but to the internal surfaces of the lids, which must be separated from each other and everted, so that these surfaces may be exposed. If, from the thickness of the conjunctiva, the lids are disposed to remain everted, they must be carefully replaced. This application may be made with a bit of sponge, or, what is still better if performed by the surgeon, may be injected with a syringe. Beside this, however, it is necessary, except in the mildest cases, to employ a solution of nitr. arg. four grains, or of sulphate of

copper six grains to the ounce. This is to be applied to the surface of the eye with a camel's hair pencil, once or twice in the day. If the eyelids are disposed to become adherent during sleep, they must at night be illined with the ung. prec. rubri. In some mild cases, the last application alone has effected a cure. The other topical remedies proposed by Dr. McK. are, scarification of the lids and of the eye itself, leeches to the temples, and vesication behind the ear. Those of a more general nature are the oleum ricini as a cathartic, and calomel as an alterative, in tedious cases.

The extensive experience which Mr. McKenzie has had as an ophthalmic surgeon, renders his opinion on this subject an important authority, and one from which we would not, on light grounds, venture to dissent. By most practitioners, however, the treatment will probably be thought more active than in ordinary cases is necessary or useful. The astringent injection which is recommended is very much more powerful than that which has been employed by other surgeons. That usually prescribed by Mr. Ware in similar cases, contained one grain of blue vitriol to the ounce of water, and this was diluted before using. Great judgment and caution are requisite in regulating the strength of applications to so delicate a part as the eye. We have seen, in our own practice, a case of ulcerated cornea precisely similar to those in which Mr. Guthrie employs his ung. nit. arg., but which, after resisting these

severe measures, improved and recovered rapidly under the use of a very weak solution of sulph. zinc. The paper of Mr. McKenzie to which we have referred, will be found in the Glasgow Journal for November.

BOSTON, TUESDAY, JANUARY 12, 1830.

MODE OF APPLYING LEECHES.

A HUNGRY animal seldom needs much persuasion to lay hold on the food set before him. The leech, particularly the American leech, seems to form an exception to this rule. Numerous have been the means adopted by different persons to persuade this animal to quaff his favorite nectar. Cream has been spread over the part to be bitten, as if to inform him that the milk of his engorgement was beneath. Raw beef has been rubbed upon it, to remind him of the *déllice* in waiting, or else to deceive him into the belief that his food was very near at hand, and thus encourage him to commence operations. When these means have failed, as if he had not spirit or power enough to penetrate the thin membrane which encases the human fabric, the work has been begun for him with the point of a lancet. But with all these baits and allurements at command, we know of few tasks so tiresome and so trying to the patience, as that of applying American leeches in the winter season. It deserves to be ranked among the miseries of life.—With great pleasure, therefore, we hail the discovery of a method *said to be* immediately effectual in accomplishing this desirable end. The author of this discovery has been led to it by a course

the most natural imaginable. Confiding in the soundness of the principle, that “a bird which can sing and wont sing, must be *made* to sing,” he dismisses at once all persuaders, and takes to the second course; and having found that this animal has as great an aversion to brass, as some young lads, who possess a large share of it, have to a certain vegetable production, he holds up this rod over him, with immediate effect.

This metallic composition, drawn into wire, is woven into a basket about the shape of an old-fashioned wire mouse-trap, and about the size of a new-fashioned wineglass. Into this machine the leeches are placed, and the open mouth of the basket is then applied to the skin which is to be punctured. The animals, instead of attaching themselves to the brass wire, as they generally do to a glass vessel, shun it most sedulously, and, driven from every other side of their cage, they rest on the skin, and eagerly commence the acts of puncturing and suction.

If this mode is found to be really as efficacious as it is represented to be by the discoverer, it will be the means of preventing a vast deal of impatience and petulance, as well as of enabling us to adopt an effectual method of relieving irritation, without the annoyance to the sick which is so apt to modify and often coun-

teract the effect of the application. The use of the common native leech, however, seems likely to be almost superseded, in this vicinity at least, by those imported from Germany and France. These latter attach much more readily than the natives, and draw a larger quantity, and leave an outlet for a much greater discharge. They will not however always bite without delay or inconvenience.

The usual mode in which these curious animals are sent here, is to pack them in boxes nearly filled with argillaceous earth. It has been usual, on their arrival here, to transfer them from this substance to vases of water ; but it is now the practice with many of our druggists to let them remain without disturbance ; and the success of this plan, though far from uniform, is said to be at least equal to that of the other. If indeed this substance be the best that can be adopted for their preservation during a voyage, we see no reason why it should not answer equally well for the purpose of keeping them while on shore. The peculiar susceptibilities of the leech to injury from external causes, seems yet to require much explanation ; and one who should make himself fully acquainted with their habits, might render this knowledge very useful to himself and the community.

The utility of leeches in countries where they can be always obtained and depended on, is exceedingly great ; whereas in this country, from their uncertainty and the trouble attending their application, they have been at times almost abandoned as a medical agent. In France, great attention is paid to the breed of leech-

es. We see in a recent journal that a considerable importation had been made from Senegal, and that experiments were making in the Parisian hospitals to determine their value as compared with the native leech. Could the foreign animal be preserved and multiplied in this country, it would form an important addition to our medical resources.

MEDICAL INQUIRER.

WE have received the first No. of a new monthly Journal, entitled *The New York Medical Inquirer*. The motto of this periodical is,—

“ Let mystery be stripped of all pretence,
And practice be combined with common sense.”

A motto sufficiently indicative, if we may judge from the specimen before us, of the character and spirit of the work. It is designed for general circulation. The success of the Philadelphia Journal of Health has given an impulse to works of this description ; and we understand that a Journal of like character is to be published in this city. If generally read and acted on, the salutary precepts usually diffused in such works are calculated to lessen the amount of human suffering. One in each of our great cities might certainly be supported.

VACCINATION.

THE following is decidedly the most efficacious mode which has ever been adopted to secure a general vaccination among the poor. The *Bury and Norwich Post*, an English newspaper, states that,—

“ Information having been given

that this dangerous and infectious disease is very prevalent in various parts of this city, public notice has been issued, by order of a court of mayoralty, recommending to the inhabitants immediately to have recourse to vaccination, and stating that the poor inhabitants may receive from the Corporation of Guardians a reward of two shillings and sixpence for each person who may be vaccinated."

THE MEMBRANA TYMPANI.

It has been long observed, that in the act of attentive listening the mouth is partially opened, which is believed to increase the power of hearing, and facilitate the transmission of feeble sounds to the internal ear through the Eustachian tubes. I believe the alteration in the form of the external auditory passage, which is produced by the opening of the mouth, has been overlooked; but, if I mistake not, it is to this cause any increased facility of hearing, by such act, may be attributed. By placing the finger in the ear, and opening the mouth, the change in the form of the auditory passage is immediately observed, by the withdrawal of the articulating process of the lower jaw from within its axis, and thus enabling the sonorous undulations to impinge more directly upon the membrana tympani—*Lon. Med. Gazette.*

Removal of the Arm, Scapula and Clavicle.—An account is given, in a London Journal, of a sailor, in

whom all these parts were totally and successfully amputated by Dr. Ralph Cuming, formerly Surgeon to the Naval Hospital at Antigua. The cause of the operation was a severe gunshot wound.

Decomposition of Corrosive Sublimate by Vegetable Bodies.—According to the experiments of M. Fabian, the mucilage of quince seed (semence de coing), and that of sallow, decomposes corrosive sublimate the instant it is mixed with its solution; but the decoction of marsh-mallow does not produce the same effect, and the extract of liquorice only partially.—*Phil. J. of Pharm.*

Preparation of Hartshorn Jelly.—The following process is due to M. Ferrez:—Four ounces of rasped hartshorn are to be steeped in eight ounces of water, acidulated with sixty grains of muriatic acid for ten minutes, and then washed carefully in two or three waters. It is then to be boiled with fresh water for half an hour, pressed through a cloth, and the liquid filtered whilst hot. This fluid is the jelly, which, being qualified by sugar or other ingredients, and boiled slightly, gives, upon cooling, a perfectly clear and good jelly for the table.—*Jour. de Phar.*

United Twins separated.—M. Mayor states, in the *Journal de Geneve* for July 30, 1829, that two girls, united like the Siamese Brothers, were separated by an operation, and both of them lived.

WEEKLY REPORT OF DEATHS IN BOSTON, ENDING DECEMBER 31.

Date.	Sex.	Age.	Disease.	Date.	Sex.	Age.	Disease.
Dec. 26.	F.	28 yrs	consumption	F.	2 1-2 y		measles
28.	F.	9	unknown	M.	26		unknown
29.	F.	27	bilious fever	M.	85		brain fever
M.	72		complaint of the stomach	M.	80		old age
M.	3		mortification	F.	35		consumption
M.	64		intemperance	M.	18		epilepsy
M.	5		lung fever	31. M.	49		dropsy in the head
30.	F.	16 mo.	whooping cough	M.	20 mo		worms

Males, 10,—Females, 6. Total, 16.

ADVERTISEMENTS.

NEW MEDICAL BOOKS.

JUST published, and for sale, by CARTER & HENDEE,—Malaria; an Essay on the Production and Propagation of this Poison. By JOHN McCULLOCH, M.D. F.R.S., &c. &c.

An Essay on the Diseases of the Internal Ear. By I. A. SAISSY, M.D. Translated from the French, by NATHAN R. SMITH, M.D., Professor of Surgery in the University of Maryland; with a Supplement on Diseases of the External Ear, by the Translator.

Observations on the Utility and Administration of Purgative Medicines, in several Diseases. By JAMES HAMILTON, M.D., Fellow of the Royal College of Physicians, &c. &c. From the Fifth Edinburgh Edition.

A Treatise on Pathological Anatomy. By WILLIAM E. HORNER, M.D., Adjunct Professor of Anatomy in the University of Pennsylvania, Surgeon at the Infirmary of the Philadelphia Almshouse, Member of the American Philosophical Society, &c.

Elements of Operative Surgery. Translated from the French of A. TAVERNIER, Doctor of Medicine of the Faculty of Paris, &c., with copious Notes and Additions. By S. D. GROSS, M.D.

A Treatise on the Nature, Cause and Treatment of Contagious Typhus. From the German of J. VAL DE HILDEBRAND, Imperial and Royal Counsellor, Professor of the Practice of Medicine in the University of Vienna, &c. &c. By S. D. GROSS, M.D.

An Essay on the Morbid Sensibility of the Stomach and Bowels. By JAMES JOHNSON, M.D.

Examinations in Anatomy, Physiology, Practice of Physic, Surgery, Chemistry, Materia Medica, and Pharmacy. For the Use of Students. By ROBERT HOOPER, M.D. Dec. 22.

MEDICAL SCHOOL OF MAINE.

THE MEDICAL LECTURES at BOWDOIN COLLEGE will commence on TUESDAY, February 23, 1830. Theory and Practice of Physic, by JOHN DELAMATTER, M.D. Anatomy and Surgery, by J. D. WELLS, M.D. Midwifery, by JAMES MCKEEN, M.D.

Chemistry and Materia Medica, by P. CLEVELAND, M.D.

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Degrees are conferred at the close of the Lecture term in May, and at the following Commencement of the College in September. A systematic course of instruction, embracing Recitations in all the branches of Medical Science, Demonstrations, and Lectures, will be given by the Professors, during the interval between the annual courses of Lectures.

Boarding may be obtained in the Commons Hall at a very reasonable price.

Brunswick, Dec. 4, 1829.

Dec. 15.—4teop.

DEWEES' PRACTICE.

JUST published and for sale by CARTER & HENDEE, A PRACTICE OF PHYSIC, comprising most of the Diseases not treated of in "Diseases of Females" and "Diseases of Children." By William B. Dewees, M.D., Adjunct Professor of Midwifery in the University of Pennsylvania, etc. etc.

"We live in an age in which the fear of debility causes a prodigal use of stimulants; and this too often at the expense of the health and the life of the patient." —*Broussais Phleg Chron. Vol. 2, p. 82.*

"Had I dared to bleed freely, and especially by means of leeches, the patient might have been saved; but I was afraid of debility. But who is to blame?"

Feb. 2.

AN ENGRAVING,

REPRESENTING the Perfect and Imperfect Cow Pox and the Chicken Pox, during their course, by J. D. Fisher, M.D. This day published and for sale by CARTER & HENDEE, cor. of Washington and School sts. Price 62 1-2 cts. Jan 26.

Published weekly, by JOHN COTTON, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid*.—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.

I.

NEW INTESTINAL WORM.

At the sitting of the Academy of Sciences, of the 11th of October, M. G. Cuvier read a paper on the new kind of Intestina, or parasite worm. In introducing the subject, the celebrated naturalist observed that among the intestinal, or parasite worms, a certain number have, on the under side, or at the hinder extremity of the body, several organs in the form of air-holes, more or less like those which are observable on the arms of a polypus, or at the lower extremity of the body of a leech. From the number of these organs, some naturalists have derived the names given to the animals which possess them; but, taking these holes for mouths, they have composed such names of the number, and of the word *stoma*, calling them respectively distoma, hexastoma, polystoma. M. Cuvier himself having seven and twenty years ago discovered, in the Mediterranean, a species of this family having three holes, conformed to the custom already established, and called it "Tristoma." It is now, however, well ascertained, that these organs do not serve to suck up nouriture any more than the organs of the same form possessed by the polypus and leech; the animal only makes use of them to fix it-

self, and it is not difficult, with a little attention, to find the real mouth, which is single, and very different from the other apertures.

M. Cuvier allowed, therefore, that the terms *dystoma*, *tristoma*, &c., are, in fact, inappropriate; and said that nothing but the inconvenience which the study of natural history is subjected to by the change of names, reconciles him to adopt them in preference to those of *hexacotyles*, &c., proposed by M. Blainville, and which express with more exactness the particular organization which they are intended to signify. However that might be, the animal presented to the Academy, said M. Cuvier, belonged to the genus of which he had just spoken, but it was infinitely more polystomatic, or more polycotylous, than any which had been ever before described. It was, besides, he said, the giant of *Polycotyles*. The greater number of these animals are little; many are microscopic; the species of which he presented one was four, five or six inches long. It had more than a hundred apertures, and if, in giving it a name, the analogy of the species most approaching to it in character were to be observed, it ought to be called *hecatostoma*, or *hecatoncotyle*.

In addition to the singularity of its organization, is that of the situation which it chooses, or rather

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